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Wednesday, 11th November 2026

(The House met at 9.30 a.m.)

[The Temporary Speaker
(Hon. (Dr) Rachael Nyamai) in the Chair]

PRAYERS

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Serjeant-at-Arms, ring the quorum bell for 10 minutes.

(The Quorum Bell was rung)

The ten minutes have expired. Serjeant-at-Arms, I order that the Quorum Bell is rung for an additional five minutes.

(The Quorum Bell was rung)

Hon. Members, we are now able to transact business. Clerks-at-the-Table, you may start. We are ready.

PAPERS

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Chairman of the Departmental Committee on Health, Hon. (Dr) Nyikal, you have a Paper to lay.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Speaker, I beg to lay the following Paper on the Table:

Report of the Departmental Committee on Health on its consideration of the Medical Practitioners and Dentists (Amendment) Bill (National Assembly Bill No. 10 of 2026).

Thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you. Next is the Chairman of the Public Investments Committee on Commercial-Affairs and Energy. Is the honourable Chairman in the House?

Hon. John Namoit (Turkana South, ODM): Hon. Temporary Speaker, I beg to lay the following Papers on the Table:

Reports of the Public Investments Committee on Commercial-Affairs and Energy on:

1. Fifth Report on examination of the audited Financial Statements of selected state corporations in the water sector.
2. Sixth Report on examination of the audited Financial Statements of selected state corporations in the water sector.
3. Seventh Report on examination of the audited Financial Statements of selected state corporations in the water sector;

Thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Next Order.

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NOTICES OF MOTIONS

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Chairperson of Public Investments Committee on Commercial Affairs and Energy, proceed. Please use the next microphone. Move to the next microphone.

ADOPTION OF FIFTH REPORT OF PIC ON COMMERCIAL AFFAIRS AND ENERGY

Hon. John Namoit (Turkana South, ODM): Hon. Temporary Speaker, I beg to give notices of the following Motions:

THAT, this House adopts the Fifth Report of the Public Investments Committee on Commercial Affairs and Energy on its examination of the audited financial statements of the following State corporations, laid on the Table of the House on Wednesday, 11th November 2026:

(a) Coastal Water Works Development Agency for the Financial Years 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(b) Tana-Athi Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(c) Water Resources Authority for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(d) Central Rift Valley Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(e) Hydrologists Registration Board for the Financial Years 2021/2022, 2022/2023, 2023/2024 and 2024/2025.

ADOPTION OF SIXTH REPORT OF PIC ON COMMERCIAL AFFAIRS AND ENERGY

THAT, this House adopts the Sixth Report of the Public Investments Committee on Commercial Affairs and Energy on its examination of the audited financial statements of the following State corporations, laid on the Table of the House on Wednesday, 11th November 2026:

(a) North Rift Valley Water Works Development Agency for the Financial Years 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(b) Regional Centre on Groundwater Resources Education, Training and Research in East Africa for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(c) Tana Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.

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(d) Lake Victoria South Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.

ADOPTION OF SEVENTH REPORT OF PIC ON COMMERCIAL AFFAIRS AND ENERGY

THAT, this House adopts the Seventh Report of the Public Investments Committee on Commercial Affairs and Energy on its examination of the audited financial statements of the following State corporations, laid on the Table of the House on Wednesday, 11th November 2026:

(a) Kenya Water Institute for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(b) Athi Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(c) Northern Water Works Development Agency for the Financial Years 2018/2019, 2019/2020, 2020/2021, 2021/2022, 2022/2023, 2023/2024 and 2024/2025.
(d) National Irrigation Authority for the Financial Years 2018/2019, 2019/2020 and 2020/2021.

Thank you, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you, Chairman. Next Order.

QUESTIONS AND STATEMENTS

REQUESTS FOR STATEMENTS

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): The first request for Statement is by Hon. Joseph Gitari, Member for Kirinyaga Central. You may proceed with your Statement request. It seems like you have a challenge with the microphones. Try the next one.

PERSISTENT WATER SHORTAGES AT MWEA IRRIGATION SCHEME

Hon. Joseph Gitari (Kirinyaga Central, UDA): Hon. Temporary Speaker, pursuant to the provisions of Standing Order 44(2)(c), I rise to request for a Statement from the Chairperson of the Departmental Committee on Agriculture and Livestock regarding persistent water shortages and rationing affecting rice farmers at Mwea Irrigation Scheme in Kirinyaga County.

Farmers within Mwea Irrigation Scheme, particularly in Mutithi, Wamumu, Thiba and Tebere, have been experiencing water shortages and rationing, which are adversely affecting rice production and, consequently, farmers' livelihoods. The persistence of these challenges, despite the existence of river dams and rivers supplying water to the scheme, raises concerns regarding the adequacy and distribution of irrigation water. The shortages have disrupted rice cultivation, affected production and exposed farmers to the risk of reduced yields and hence financial losses. Although there are reports of a proposal to construct a mini-dam to increase water storage capacity and improve the supply of irrigation water to farmers within the scheme,

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the timeline for the delivery of the project is unknown. There is, therefore, need for immediate interventions to address the ongoing water shortages pending the proposed construction of the new dam.

It is against this background that I request for a Statement from the Chairperson of the Departmental Committee on Agriculture and Livestock on the following:

1. The reasons for persistent water shortages and rationing in Mutithi, Wamumu, Thiba and Tebere irrigation areas despite the existence of Thiba Dam and other sources serving the Mwea Irrigation Scheme.
2. Data on the current water storage capacity, available water volumes and distribution arrangements for Thiba Dam, including whether the available water is sufficient to meet the irrigation requirements of the scheme.
3. The measures being taken by the Government to address the water shortages and ensure equitable, adequate and reliable distribution of irrigation water to facilitate uninterrupted rice farming within the irrigation scheme.
4. The status of the proposed construction of Nyamindi Dam, including its anticipated water storage capacity, funding arrangements and implementation timelines.
5. The long-term plans by the Government to expand irrigation infrastructure in Mutithi and other affected areas within the Mwea Irrigation Scheme.

I thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you. This Statement request is referred to the Departmental Committee on Agriculture and Livestock. Chairman, when can we get a response to this Statement request?

Hon. (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Thank you very much, Hon. Temporary Speaker. I believe that in two weeks' time, we will be able to get a comprehensive response. I think the best thing is to discuss it at that time because the reference is to Thiba Dam, which was inaugurated just the other day. We may be having a problem. I do not know whether the issue is the quantity or distribution, but the Ministry will tell us.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): How long will you take to avail the response to Hon. Gitari?

Hon. (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Let us give the Ministry two weeks. We can do so in two weeks' time.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): In two weeks? Is that acceptable to you, Hon. Gitari?

(Hon. Joseph Gitari spoke off the record)

Please move to another microphone. We will do our best to ensure that you are on record.

Hon. Joseph Gitari (Kirinyaga Central, UDA): Two weeks is okay.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): The next one is by Hon. Babu Owino. Please proceed with your Statement.

LOSS OF KENYANS' INVESTMENTS IN REAL ESTATE AND HOUSING PROJECTS

Hon. Babu Owino (Embakasi East, ODM): Hon. Temporary Speaker, the Statement request regards the loss of investment by Kenyans in private real estate and housing projects. Pursuant to the provisions of Standing Order 44(2)(c), I wish to request for a Statement from

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the Chairperson of the Departmental Committee on Housing, Urban Planning and Public Works regarding the loss of investments by Kenyans in private real estate and housing projects.

Reports of stalled, abandoned or incomplete private developments, alleged misappropriation of purchasers' funds and the subsequent sale or auction of project properties have raised concerns regarding the protection of home buyers and investors across the country. For instance, approximately 110 Kenyans reportedly invested in an off-plan development known as Terrace Apartment, situated along Hatheru Road, Lavington in Nairobi City County, between 2016 and 2018. The developer allegedly failed to complete the project, and the property was subsequently auctioned by a bank following a loan default relating to the project.

It is further reported that only five of the 110 investors were refunded their money by the management company, leaving the remaining purchasers at risk of losing their investments. This goes against Article 27(5) of the Constitution, which guarantees freedom from discrimination and also goes against the doctrine of legitimate expectations. Allegations of collusion between financial institutions and private developers in irregular property auctions have heightened those concerns.

It is against this background that I request for a Statement from the Chairperson of the Departmental Committee on Housing, Urban Planning and Public Works on the following –

1. Status of the proposed Terrace Apartments development, including details of the developer, the relevant approvals and the circumstances that led to the project stalling.
2. A report on the amounts paid by the 110 investors, indicating how the funds were utilised and the amounts refunded to date.
3. Circumstances under which the project property was charged to the said bank and subsequently auctioned, including whether the purchasers were informed of the charge and impending auction.
4. Status of investigations into the alleged misappropriation of purchasers' funds and the action taken to assist the affected purchasers to recover their investments.
5. Measures being taken to strengthen the regulation of off-plan developments and the funds of purchasers from loss, misappropriation or exposure to undisclosed financial liabilities.

Thank you, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you. The Statement request by Hon. Babu Owino is referred to the Departmental Committee on Housing, Urban Planning and Public Works. Is the Chair, the Vice-Chairperson, or a Member of that Committee in the House? Hon. Tonui, you may proceed. When can we get a response?

Hon. Joseph Tonui (Kuresoi South, UDA): Thank you, Hon. Temporary Speaker. I promise to bring a response in two weeks' time.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): He has undertaken that you will get a response within two weeks. What is your position on that Hon. Babu Owino?

Hon. Babu Owino (Embakasi East, ODM): That is in order.

STATEMENT

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): We have a response to a Statement request. A Statement request by the Hon. Jane Kihara is being responded to by the Chair of the Departmental Committee on Transport and Infrastructure. I do not see the Chairperson in the House, but I can see Hon. Jayne Kihara. Hon. Komingoi, are you ready? Please proceed.

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UPGRADING OF KINUNGI-MARAIGUSHU
ROAD TO BITUMEN STANDARD

Hon. Kibet Komingoi (Bureti, UDA): Hon. Temporary Speaker, the Member for Naivasha Constituency, Hon. Jayne Kihara, requested for a Statement from the Chairperson of the Departmental Committee on Transport and Infrastructure regarding the upgrading of the Kinungi-Maraigushu Road to bitumen standard. In the Statement request, Hon. Kihara sought to establish the following:

Measures put in place to ensure the timely completion of the upgrading of Kinungi-Maraigushu Road to bitumen standards, including an indication of the proposed timelines for its completion; and steps taken to ensure routine maintenance of the road, such as clearing of bushes to enhance accessibility by road users connecting to Kinungi and Maraigushu markets, pending the upgrading works.

The Committee received a response from the Cabinet Secretary for Roads and Transport, which I now wish to make on behalf of the Chairman. Firstly, regarding the measures put in place to ensure timely completion of the upgrading of Kinungi-Maraigushu Road to bitumen standards, the Cabinet Secretary submitted that the Kinungi-Maraigushu Road falls under the devolved jurisdiction of the County Government of Nakuru. Nevertheless, the Ministry is fully cognisant of the critical socio-economic role this infrastructure plays.

The Cabinet Secretary further submitted that, in this regard the Ministry, through the implementing agencies, is open to a collaborative framework with the County Government in providing technical guidance, advisory support and any necessary assistance to ensure this road is upgraded.

Secondly, regarding the steps taken to ensure routine maintenance of the road, the Cabinet Secretary submitted that once collaborative mechanisms are put in place, the Ministry, in conjunction with the County Government, will expedite the process of having the maintenance works done to enable accessibility for use.

I submit, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Jayne Kihara, you have an opportunity to indicate whether that Statement is satisfactory.

Hon. Jayne Kihara (Naivasha, UDA): Hon. Temporary Speaker, the Statement was just written for the sake of it. This is a road that featured in the Jubilee Manifesto in 2017. There is no way they can tell us that they are collaborating with the county government. This is a Kenya Urban Roads Authority (KURA) road, which I have been following up on - it is only eight kilometres long - and since that time, they have done less than one kilometre. If they are collaborating with the county government, they should follow up and establish whether the work has been done.

I do not know what happens from there. I am not convinced. In any case, KURA does not work with the county governments. This road should be constructed by KURA. I bumped into the Director-General of KURA, and I asked him about this road. He told me that he had no funds to construct it. What the Chairman has told me, through *Mheshimiwa,* is an excuse to make sure that he has said something. Hon. Temporary Speaker, I do not know what happens from there.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Would you like to say something on behalf of your Chairman, also bearing in mind that this response has come from the Ministry? What comment do you have?

Hon. Kibet Komingoi (Bureti, UDA): Hon. Temporary Speaker, I do not have useful information to add to what the Cabinet Secretary has said. You may recall that there was a lawsuit by the county governments with regard to classification of roads. This House and the Ministry has not resolved that matter. Perhaps that is where we can start, so that the road can

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be clearly demarcated in the register, whether it is a county road or a national Government road. This will enable us to take on the Ministry on the response that they have provided.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): It is noted that, according to the Member who requested for the Statement, the answer is not satisfactory. Let the Committee be informed so that it may seek further clarification from the Cabinet Secretary, so that Hon. Jayne Kihara can receive a satisfactory response. When can we have it? How long do you commit to bring it to the House?

Hon. Kibet Komingoi (Bureti, UDA): On behalf of the Chairman, the best we can do is to allow the Committee and Hon. Jayne Kihara to meet with KURA so that we can get a satisfactory response. The Ministry said the road falls under the county government. For it to undertake the work being requested, it needs the collaboration of the two levels of government. Probably, the best route is not to seek another response from the Ministry. We will facilitate a meeting between the Cabinet Secretary and Hon. Jayne Kihara, so that we can establish those facts. After we do it, we will know how to proceed.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): That is fair enough. Thank you. Hon. Charles Nguna, you are not a Member of that Committee. What would you like to say about this?

Hon. Charles Nguna (Mwingi West, WDM): I rise on a point of order, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): What is out of order, Hon CNN?

Hon. Charles Nguna (Mwingi West, WDM): Hon. Komingoi is not being truthful in his Statement regarding that road. If KURA started its construction, there is no dispute from the county government on its construction. Hon. Komingoi needs to withdraw his Statement, based on the fact that the county government has not contested the construction of this road, and give the Member a satisfactory response. They started the construction of the road, and they have to finish it.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you. Those are generally fair statements. I order that the next time the Cabinet Secretary appears before the Departmental Committee on Transport and Infrastructure, the Clerk's Office should ensure that Hon. Jayne Kihara has the information so that she can appear and the matter can be prosecuted in her presence.

Next Order.

COMMITTEE OF THE WHOLE HOUSE

(Order for Committee read)

[The Temporary Speaker
(Hon. (Dr) Rachael Nyamai) left the Chair]

IN THE COMMITTEE

[The Temporary Chairlady
(Hon. (Dr) Rachael Nyamai) in the Chair]

THE LOCAL CONTENT BILL
(National Assembly Bill No. 45 of 2025)

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The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Members, we are in the Committee of the whole House to consider two Bills. The first one is the Local Content Bill (National Assembly Bill No. 45 of 2025) by Hon. Jane Kagiri. I would like to confirm whether she is in the House. Yes, I can see her seated. The second one is the Health (Amendment) Bill (National Assembly Bill No. 56 of 2024) by Hon. Njeri Maina. I can see that she is in the Chamber.

Clause 3

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Jane Kagiri has an amendment.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move:

THAT, Clause 3 of the Bill be amended—

(a) in paragraph (e) by deleting the word "youth" appearing immediately after the word "Kenyan" and substituting therefor the word "citizens"; and

(b) by inserting the following new paragraphs immediately after paragraph (e)—

(ea) promote capacity-building through transfer of technology, knowledge and skills to Kenyan citizens; and

(eb) promote the participation of women, youth, persons with disabilities and marginalised groups in the local content value chain.

The amendment mandates the transfer of technology and skills to Kenyan citizens and local companies. It further operationalises Article 21 of the Constitution by ensuring that marginalised groups benefit from local content value chains. Many years ago, China's high-speed railway was constructed by France, Germany and Japan. China required these three countries to transfer the technology to its people. Today, China is the leading constructor of high-speed railways in the world. Because the skills were left in their country, they are now able to do the jobs that need to be done.

Today, we are proud of Talanta Stadium and Bomas of Kenya, which are under construction. We are equally proud of the upcoming airport expansion programme. The next time we need to construct these projects, will we have Kenyans who shall have received the skills to do these jobs?

Thank you, Hon. Temporary Chairlady.

(Question of the amendment proposed)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): I do not see any interest in this Bill. If you are interested in it, please; press the intervention button. In case you realise that your microphone is not working, let the Clerks-at-the-Table know.

(Question, that the word to be left out be left out, put and agreed to)

(Question, that the word to be inserted in place thereof be inserted, put and agreed to)

(Question, that the words to be inserted be inserted, put and agreed to)

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(Clause 3 as amended agreed to)

Clause 4

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Proceed, Hon. Jane Kagiri. I would also like to guide you to focus only on the amendment and its justification. Do not debate.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move:

THAT, Clause 4 of the Bill be amended—

(a) in sub-clause (1) by inserting the words "and the Sector-Specific Localisation Plan for its respective sector" immediately after the word "section";

(b) by inserting the following new sub-clauses immediately after sub-clause (1)—

(1A) For the purposes of subsection (1), the Cabinet Secretary shall, in consultation with the Committee and relevant industry stakeholders, prescribe by a notice in the *Gazette*—

(a) the minimum local content requirements for each sector specified under section 4; and

(b) a phased implementation timeline specific to each sector.

(1B) The Cabinet Secretary, in the exercise of the functions under subsection (1A), shall consider—

(a) the existing capacity of local companies to supply goods and services in that sector;

(b) the existing legal and regulatory framework applicable to the sector; and

(c) the level of participation of Kenyan citizens in that sector.

(1C) Despite the provisions of sub-section (1B), where a sector is governed by existing legislation that already imposes local content obligations, the Cabinet Secretary shall ensure that any sector-specific schedule made under this section is consistent with and complementary to those obligations and in case of any conflict, the sector-specific legislation shall prevail to the extent of the inconsistency.

(c) in sub-clause (2) by inserting the following new paragraphs immediately after paragraph (g)—

(ga) agricultural services;

(gb) marketing and distribution services;

(d) in subclause (3) by deleting the words "source at least sixty percent (60%) percent" appearing immediately after the word "shall" and substituting therefor the words "comply with the minimum local content requirements specified in the prescribed Sector-Specific Localisation Plan for its respective sector including sourcing";

(e) in subclause (4) by inserting the words "as specified in the prescribed Sector-Specific Localisation Plan" immediately after the word "companies";

(f) in subclause (5) by deleting the words "all" and substituting therefor the words "agricultural produce from Kenyan farmers in accordance with the Sector-Specific Localization Plan prescribed by the Cabinet Secretary responsible for agriculture, in consultation with relevant stakeholders";

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(g) in subclause (6), by deleting the word "employ" and substituting therefor the words "prioritise the employment of";
(h) by inserting the following new subclause immediately after subclause 7—

"(7A) Despite subsection (7), a foreign company may, with the approval of the Cabinet Secretary, engage non-Kenyan citizens for specialized technical skills where such skills are demonstrably unavailable in Kenya, provided that—
(a) such engagement is for a specified period; and
(b) the foreign company implements a skill transfer program for Kenyan citizens"; and
(i) by deleting subclause (8).

The amendment seeks to mandate a body to supervise, coordinate and ensure compliance with the provisions of the Act while advising the Cabinet Secretary on matters relating to local content requirements.

Thank you, Hon. Temporary Chairlady.

(Question of the amendment proposed)

(Question, that the words to be inserted be inserted, put and agreed to)

(Question, that the words to be left out be left out, put and agreed to)

(Question, that the words to be inserted in place thereof be inserted, put and agreed to)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Jane Kagiri, please approach the Table so that we confirm whether you have a further amendment on this Clause.

(Hon. Jane Kagiri consulted with the Temporary Chairlady)

Hon. Jane Kagiri, I will give you an opportunity to move the further amendment.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move:

THAT, Clause 4 of the Bill be further amended by inserting the following provisions immediately after the proposed new subclause (1A) —

"Provided that in respect of the transport, insurance and banking services, the minimum local content put shall be at least 60 per cent, subject to review by the committee."

(Question of the further amendment proposed)

(Question, that the words to be inserted be inserted, put and agreed to)

(Clause 4 as amended agreed to)

Clause 5

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Hon. Jane Kagiri move your amendment

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Hon. Jane Kagiri (Laikipia County, UDA): Thank you, Hon. Temporary Chairlady. I beg to move:

THAT, Clause 5 of the Bill be amended in—

(a) sub-clause (1) by inserting the words "in consultation with the Committee," immediately after the words "Cabinet Secretary"

(b) sub-clause (2) by inserting the following new paragraphs immediately after paragraph (b)—

(ba) the minimum local content levels applicable in specific sectors;

(bb) guidelines for the implementation of minimum local content requirements in specific sectors;

(bc) form and content of a Local Content Master Plan; and

(bd) form and procedure for lodging a complaint or an appeal.

The amendments are necessary to empower the Cabinet Secretary in consultation with the Committee to exercise powers and discharge functions under the Act necessary for implementation of the Act.

(Question of the amendment proposed)

Give the microphone to the Member for Buuri.

Hon. Mugambi Rindikiri (Buuri, UDA): I think this is a very important clause because it enhances public participation and consultation. In many cases you will find a very important concept like this one, the Cabinet Secretary is left with all the powers but now this Bill states very clearly that there needs to be consultation. I think the key word here is consultation, and I support based on that.

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Thank you, Hon. Members.

(Question, that the words to be inserted be inserted, put and agreed to)

(Clause 5 as amended agreed to)

(Clause 6 agreed to)

New Clause 3A

THAT, the Bill be amended by inserting the following new clause immediately after Clause 3:

Local Content Compliance Comittee.

3A. (1) There is established the Local Content Compliance Committee.

(2) The functions of the Committee shall be to—

(a) develop and periodically review the minimum local content quotas and make recommendations to the Cabinet Secretary for their inclusion in the Sector-Specific Localisation Plans;

(b) review and approve the Local Content Master Plans submitted under this Act;

(c) supervise, monitor and enforce compliance with the provisions of this Act and any other written law;

(d) ensure compliance with existing regional and international trade obligations;

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(e) maintain a public database of certified local suppliers and service providers to facilitate the sourcing of local goods and services;
(f) coordinate capacity building and technology transfer initiatives between foreign companies, local companies and Kenyan citizens;
(g) advise the Cabinet Secretary on the granting of waivers or exemptions from local content requirements in accordance with the provisions of this Act;
(h) receive, investigate and mediate complaints and disputes arising from the implementation of local content requirements; and
(i) perform such other functions as may be necessary for the effective implementation of the provisions of this Act.

(3) The Committee shall consist of—
(a) the Principal Secretary in the Ministry for the time being responsible for trade or a representative designated in writing and who shall be the Chairperson;
(b) the Principal Secretary in the Ministry for the time being responsible for labour or a representative designated in writing;
(c) the Principal Secretary in the Ministry for the time being responsible for finance or a representative designated in writing;
(d) the Attorney-General or a representative designated in writing; and
(e) three representatives of the private sector nominated by the body representing the largest number of institutions in the private sector—
(i) one representing foreign companies;
(ii) one representing local companies; and
(iii) one member with expertise in trade, commerce or law.

(4) The Cabinet Secretary shall appoint the members of the Committee through a notice in the *Gazette*.

(5) The members of the Committee appointed under paragraph (e) shall serve for a term of three years, renewable once.

(6) The conduct and regulation of the business and affairs of the Committee shall be as prescribed by the Cabinet Secretary in consultation with the Committee.

(7) The Cabinet Secretary shall appoint the Secretariat to support the Committee.

(8) The Cabinet Secretary shall provide the Committee with such funds as are necessary for the proper conduct of its functions.

(9) The Cabinet Secretary shall submit annual reports to Parliament on the implementation of the local content and inclusive local content compliance.

(The new clause was read a First Time)

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The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Hon. Jane Kagiri, move Second Reading of New Clause 3A.

Hon. Jane Kagiri (Laikipia County, UDA): Thank you, Hon. Temporary Chairlady. I beg to move the unamended form of Clause 3A, that the proposed new Clause 3A be further amended by deleting sub-clause 7 and substituting therefor the following new sub-clause 7. The Cabinet Secretary shall appoint the Secretariat.

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Hon. Jane First of all, move in an amended version, for the Second Reading.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I think I need guidance on this one.

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Just say that you beg to move that New Clause 3A be Read a Second Time.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairady, I beg to move that New Clause 3A be read a Second Time.

I also move that the proposed New Clause 3A be further amended by deleting sub-clause 7 and substituting therefore the following new sub-clause

7. The Cabinet Secretary shall appoint the Secretariat from the body responsible for promoting Kenyan goods and services in export markets to support the Committee.

Thank you, Hon. Temporary Chairlady.

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): I think it is all about the Cabinet Secretary being the one to appoint the Secretariat.

(Question, that the new clause be read a Second Time, proposed)

(Question, that the new clause be read a Second Time, put and agreed to)

(Question, that the new clause be added to the Bill, put and agreed to)

New Clause 4A

THAT, the Bill be amended by inserting the following new clause immediately after Clause 4:

Enforcement and compliance.

4A. (1) The Committee may, within thirty days upon a written application by a foreign company, grant a partial waiver of local content requirements where a foreign company proves that the required goods or services are not available in the Kenyan market or do not meet international safety standards.

(2) Where the Committee determines that a foreign company has failed to comply with the minimum local content requirements or the approved Local Content Master Plan, the Committee may impose an administrative sanction including—

(a) issuance of a notice to comply within ninety days;

(b) an administrative penalty as may be determined by the Committee; or

(c) a recommendation to the relevant licensing authority for the suspension or revocation of an operating license.

(3) Despite subsection (2), a foreign company shall not be held liable for an offence or be subject to an administrative

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sanction under this section where the non-compliance is occasioned by market constraints beyond the control of the company, including—

(a) the unavailability of locally produced goods that meet the prescribed quality standards or technical specifications;

(b) a failure of local suppliers to meet the required delivery capacity or timelines;

(c) a proprietary formulation, concentrate or ingredient which is protected by intellectual property rights and is not manufactured in Kenya; and

(d) any other justifiable market constrain as may be determined by the Committee.

(4) A foreign company aggrieved by a decision of the Committee may, within thirty days of the decision, appeal to the Cabinet Secretary.

(5) A foreign company aggrieved by a decision of the Cabinet Secretary may, within sixty days of the decision, appeal to a court of competent jurisdiction.

(The new clause was read a First Time)

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Departmental Committee Chair, please move the Second Reading of New Clause 4A.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move that New Clause 4A be now read a Second Time.

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): You can explain what it is all about.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I seek a further amendment that Clause 4 of the Bill be further amended by inserting the following provisions immediately after the proposed...

The Temporary Chairlady (Hon (Dr) Rachael Nyamai): Hon. Jane Kagiri, please approach the Table.

(Hon. Jane Kagiri consulted with the Temporary Chairlady (Hon (Dr) Rachael Nyamai)

Hon. Jane Kagiri, are you ready?

Hon. Jane Kagiri (Laikipia County, UDA): Yes.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Proceed.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move that the New Clause 4A be now read a Second Time.

The amendments provide for a waiver mechanism where compliance may be difficult due to factors outside the control of a foreign company. The amendments further provide for administrative sanctions for non-compliance with the provisions of the Act.

(Hon. Owen Baya crossed the Floor without bowing to the Chair)

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The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Order, Hon. Owen Baya. You crossed from the left side of the Chamber to the right side without bowing. The rules apply to you as well.

(Hon. Owen Baya spoke off the record)

You do not even have the microphone. So, the House cannot hear what you are saying. We are relying on you because you are serving your third term. Take your seat, Hon. Owen Baya. You should be a good example to the new Members. I order you to take your seat. That should never happen again.

(Question, that the new clause be read a Second Time, proposed)

Hon. Rindikiri would like to contribute to this amendment. Please proceed.

Hon. Mugambi Rindikiri (Buuri, UDA): Hon. Temporary Chairlady, this is a very important clause. Many foreign investors are keen to invest in Kenya, but when they come, they are unable to adhere to the set local conditions. We need to give them confidence that they will be given an opportunity to be heard, which was not there before. They will be heard by the Cabinet Secretary and the courts. That gives investors confidence that there are avenues for redress should anything happen. We should support the Bill to ensure that investors' interests are taken care of.

(Question, that the new clause be read a Second Time, put and agreed to)

(Question, that the new clause be added to the Bill, put and agreed to)

New Clause 4B

THAT, the Bill be amended by inserting the following new clause immediately after Clause 4—

Local Content Master Plan.

4B. (1) A foreign company shall, within twelve months of commencement of this Act or the grant of a license, whichever is later, submit a Local Content Master Plan to the Committee for approval.

(2) The Local Content Master Plan referred to in subsection (1) shall contain the strategies through which the foreign company intends to achieve the prescribed local content requirements and shall include—

(a) an employment plan;
(b) a capacity-building and technology transfer plan;
(c) a procurement plan for locally produced goods and services;
(d) an inclusive plan for ensuring the participation of women, youth, persons with disabilities and marginalized groups;
(e) a plan for partnership and collaboration with Kenyan citizens and local companies;
(f) the technical specifications, quality standards and projected quantities required for the supply of goods and the provision of services; and
(g) a value-addition statement providing an estimate of the total quantifiable value of local content to be acquired or rendered in Kenya.

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(3) The Committee shall, within thirty days of receipt of a Local Content Master Plan under sub-section (1), review the Plan and—

(a) approve the Plan where it is satisfied that the Plan meets the prescribed local content requirements; or

(b) reject the Plan where it fails to meet the prescribed requirements.

(4) Where the Committee rejects a Local Content Master Plan under subsection (3)(b), it shall—

(a) notify the foreign company in writing, providing the reasons for the rejection; and

(b) make recommendations on the necessary amendments required for the Plan to comply with this Act.

(5) A foreign company whose Plan has been rejected shall, within thirty days of the notification, resubmit a revised Local Content Master Plan incorporating the recommendations made by the Committee.

(The new clause was read a First Time)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Jane Kagiri, you have an amendment.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move that the New Clause 4B be now read a Second Time.

The amendments provide the procedure for submission, review, approval, rejection, and resubmission of local content master plans by foreign companies to ensure compliance with the Act.

(Question, that the new clause be read a Second Time, proposed)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. KJ, please, proceed.

Hon. John Kiarie (Dagoretti South, UDA): Hon. Temporary Chairlady, I rise to support this amendment as proposed by the Mover. We all understand that this is the crux of the matter, which is the mandate of the committee that we will form. I shall contribute later when we get to the issue of the quotas, which shall emanate from the committee that we form. The Cabinet Secretary's leadership has to be in consultation with the committee. The committee should be made up of relevant industry stakeholders, so that they assist the Cabinet Secretary to make the right decisions on the quotas.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you, Hon. KJ. Hon. Rindikiri.

Hon. Mugambi Rindikiri (Buuri, UDA): Hon. Temporary Chairlady, this is actually the core content of the Bill. We want to encourage local content. People should not come to invest in our country and take everything with them and do nothing in return. They bring their own materials. They do not use our materials or develop labour or capacity. This is an employment guarantee for our locals. Many have complained that we are only exporting labour, but we also need to ensure that we retain some labour in the country through foreign investors. We have seen situations where foreigners bring in skilled labour. This is a very important Bill. Capacity building is very key. Foreign investors should not just come and invest without improving the skills of the locals.

The amendment is also very specific on gender, the youth and persons with disabilities (PwDs). No other Bill encourages investors to consider PwDs, gender and the youth. This is the core part of the Bill, which we all need to support.

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(Question, that the new clause be read a Second Time, put and agreed to)

(Question, that the new clause be added to the Bill, put and agreed to)

Clause 2

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Jane Kagiri, you have an amendment.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Chairlady, I beg to move:

THAT, Clause 2 of the Bill be amended by—

(a) deleting the definition of "foreign company" and substituting therefor the following new definition—

"foreign company" means a company, body corporate or other legal entity—

(a) incorporated, registered or otherwise established outside Kenya;

(b) registered as a foreign company under Part XXXVII of the Companies Act (Cap. 486); or

(c) incorporated, registered or otherwise established in Kenya but in which non-citizens hold a beneficial interest of more than forty-nine percent of the issued shares or voting rights or exercise effective control;

(b) deleting the definition of "local company" and substituting therefor the following new definition—

"local company" means a company, body corporate or other legal entity incorporated, registered or otherwise established in Kenya in which—

(a) more than fifty percent of its shares and voting rights are held, directly or indirectly, by Kenyan citizens; or

(b) effective control is exercised by Kenyan citizens;

(c) deleting the definition of "local content" and substituting therefor the following new definition—

"local content" means the quantifiable value addition to the Kenyan economy through the supply of goods or provision of services by Kenyan citizens or local companies and includes local capacity building and development; and

(d) inserting the following new definitions in their proper alphabetical sequence—

"effective control" means the power to exercise dominant influence or control over another company through majority shareholding, voting rights, Committee appointment rights, contractual arrangements or otherwise;

"inclusive local content" means local content that ensures equitable participation and benefits for women, youth, persons with disabilities and marginalized groups as defined under Article 260 of the Constitution;

"Local Content Compliance Committee" means the Committee established under section 3A;

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"Local Content Master Plan" means a local content plan submitted in accordance with section 4B; and

"Sector-Specific Localisation Plan" means a plan approved by the Cabinet Secretary for local procurement and workforce based on industry capacity.

The amendments provide for definition of terms that had been excluded and align the terminologies with best practices. The definitions further provide for clear institutional and operational parameters necessary for enforcement of the Act.

Allow me to read the definition of a "local company". A local company means a company, body corporate or other legal entity incorporated registered or otherwise established in Kenya, in which more than fifty per cent of its shares and voting rights are held directly or indirectly by Kenyan citizens; or effective control is exercised by Kenyan citizens. This serves to protect local content because many times, foreign companies come and camouflage themselves as local companies. We have to protect Kenyans, so that they hold majority of the rights to ensure that the Local Content Bill achieves what we intended it to.

(Question of the amendment proposed)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. KJ.

Hon. John Kiarie (Dagoretti South, UDA): I am standing to support, Hon. Jane Kagiri's amendment. We do not want to lose some key definitions. That is why we have the Committee of the whole House. Important to note is that we are not just defining "local company", but also "local content". The biggest effort here is to make sure that a person who is assembling furniture along Ngong Road is preferred to an importer of furniture into the country. In essence, it is promoting local manufacturers or the local service providers to the extent that they are protected by law.

In the past, we have been seeing dumping of products. That has been a big problem because consumers only check their prices. If we make that dumping a tradition of our trade in Kenya, the local provider I talked about along Ngong Road in Ngando Ward will end up suffering because of price undercutting. So, I take cognisance of the definition that is in Part C. It defines "local content" as the quantifiable value addition to the Kenyan economy through supply of goods or provision of services by Kenyan citizens or local companies and includes local capacity building and development. This is crisp. I do not want us to lose it out. I am glad that this amendment has come and I support it.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Chairman, do you want to contribute? Proceed.

Hon (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Hon. Temporary Chairlady, I take note of the definition of "local company". This definition will help us as a country. I am privy to investment promotion by some countries outside their boundaries. The demand is that they join local companies in the destination countries where investments have to take place. What has been happening is that some of these companies become majority shareholders. Investors get a company registered here and instead of observing that the majority of the people … We have not had a definition of a "local company" in this country. There is no law that clearly clarifies what a "local company" is. Kenyans are the minority. Therefore, they access resources for development. These resources are not few. The resources that I am alluding to is what is called "Official Development Assistance", which as per the United Nations agreements after 1945 is supposed to be, at least, 0.7 per cent of the budget of the countries that give us the Official Development Assistance. It is a lot of money.

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This proposed definition helps us a lot to define "local company." When a local company is registered under such a description it means Kenyans will benefit more. That was the essence of releasing the 0.7 per cent by those countries. I support.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you, Chairman.

(Question, that the words to be left out be left out, put and agreed to)

(Question, that the words to be inserted in place thereof be inserted, put and agreed to)

(Question, that the words to be inserted be inserted, put and agreed to)

(Clause 2 as amended agreed to)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Before we move to the next clause, I would like to recognise our guests seated in the Speaker's Gallery this morning. We have students from PCEA Makupa Academy from Mvita Constituency, Mombasa County. They are accompanied by their teachers.

(Applause)

I welcome them to the National Assembly on behalf of the substantive Speaker and the House so that they may continue observing proceedings of the House. On behalf of the House, I request Hon. Owen Baya to welcome them to the House.

(Students from PCEA Makupa remained upstanding)

You may take your seats. Hon. Owen Baya is at liberty to welcome the students in whichever language he chooses as long as it is allowed in this House. You may proceed.

Hon. Owen Baya (Kilifi North, UDA): The people of Mombasa speak better language than the people from the failed pilot school.

(Laughter)

Hon. Temporary Chairlady, I want to take this opportunity to sincerely welcome the students and teachers from PCEA Makupa Academy. The PCEA Church in Mombasa has done tremendously well to establish the school. I have personally visited the school. They even have a very beautiful hotel in Makupa area. When Members of Parliament go to Mombasa, they can get very good accommodation there. The school is one of the very best schools in Makupa. So, I welcome them. They have their future in their hands. They can decide where they want to go. They should work hard. Prayers, God's blessings, and a spirit of resilience will get them to where they want to go.

The men and women who sit in this Parliament have gone to school properly, including my friend, CNN who is a pilot. He sits in this Parliament. These students can also be pilots and doctors. We have Dr Mutunga here, who is a great agricultural economist. This lady Member, Hon. Jane, is a computer scientist. We have Dr Nyikal, one of the most respected medical practitioners in this country. We have an artist, Hon. K.J., the Member of Parliament for Dagoretti South. This young lady Member here – if you allow her to stand – who looks tiny

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and small, is the Women Representative for Kirinyaga County. She is one of the most respected lawyers in this country. Then there is me.

(Laughter)

A professor of education.

The students are welcome to this House to observe the proceedings and learn. This visit will give them a good footing in life to continue pursuing excellence. I want to urge their teachers to continue mentoring them to be better people.

Thank you.

(A Member spoke off the record)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): What is out of order? Thank you very much, Hon. Baya. You were best placed to welcome these students from your region.

Yes, Hon. K.J.

Hon. John Kiarie (Dagoretti South, UDA): This is for the benefit of the learners visiting the House. It is important that they note that the House conducts its business through the Standing Orders of the House. The Deputy Leader of the Majority Party would have hesitated to give definitions of the professions of Members. If he did not have the details… My actual profession is an educator. I am trained to a very high level in education. I do not know if he meant well when he said that I am an artist. I doubled up in arts.

I want to go on record that I am actually an educator in this Republic. I also have a Master's Degree in Development Communication to a very high level.

Thank you.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Wow! That is very important. I want to congratulate the students and confirm that I went to the same University with Hon. Owen Baya. He is well educated and grounded. I also went to the same University with Hon. K.J. He is a genius. He is an orator and a very grounded human being. And yours truly seated on this seat has a PhD in Health Promotion.

(Applause)

This is a House of serious people. You must get serious to go where you want to in life.

Hon. Members, let us go back to the business of the day.

(Title agreed to)

(Clause 1 agreed to)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Members, we have come to the end of the Local Content Bill (National Assembly Bill No. 45 of 2025). I would now like to call upon the Mover to report to the House.

Hon. Jane Kagiri (Laikipia County, UDA): Thank you, Hon. Temporary Chairlady. I beg to move that the Committee do report to the House its consideration of the Local Content Bill (National Assembly Bill No. 45 of 2025), and its approval thereof with amendments.

Thank you, Hon. Temporary Chairlady.

(Applause)

(Question proposed)

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(Question put and agreed to)

THE HEALTH (AMENDMENT) BILL
(National Assembly Bill No. 56 of 2024)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Members, we are moving to the next Bill, which is the Health (Amendment) Bill (National Assembly Bill No. 56 of 2024) by Hon. Njeri Maina.

Clause 3

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): It has an amendment. Where is the Chairman?

(Hon. (Dr) James Nyikal spoke off the record)

Proceed.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Chairlady, I beg to move:

THAT, Clause 3 of the Bill be amended —

(a) by deleting paragraph (a);

The justification is that the right to medical emergency as drafted in Section 7(1) of the Health Act ,2017 is sufficiently guaranteed. By deleting (b), the justification is that the term "free hospital care" includes care at the scene of injury to the point where comprehensive health care is provided. So, it takes all treatment before that.

By deleting (e), the justification is that a new paragraph is not proposed in (e). It is actually indicated that there will be a new paragraph, but it is not proposed. In (f), in the proposed new Subsection 4, by deleting the word "public" and inserting thereof the word "medical" after the word "emergency", that means we cover all medical facilities. That is in line with Article 43(2) of the Constitution, which states that a person shall not be denied emergency medical treatment by a health facility, whether public or private.

Lastly, by deleting the new subsection 5, the justification is that the proposed amendment is out of the scope of Section 7 of the Act, Cap. 24, which relates to emergency medical care. The amendment is proposed in the new Subsection 12A, which comes later.

Thank you.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you, Chairman.

(Question of the amendment proposed)

Those interested in this, press the intervention button. Those not interested do not.

(Question, that the words to be left out be left out, put and agreed to)

(Clause 3 as amended agreed to)

Clause 4

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Chairman.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Chairlady, I beg to move:

THAT, the Bill be amended by deleting Clause 4 and substituting therefor the following new Clause 4—

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Amendment of section 12 of Cap. 241.

4. Section 12 of the principal Act is amended in subsection (2) by inserting the words "of this Act without demanding the prepayment of prospective medical costs from a user" immediately after the expression "section 7(2)" appearing in paragraph (b).

The justification is that it is not necessary. It has been taken care of as proposed in that amendment.

(Question of the amendment proposed)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Yes, Hon. Baya. Proceed leader.

Hon. Owen Baya (Kilifi North, UDA): Thank you. I want to agree with the Chair on the insertion of the words "of this Act without demanding the prepayment of prospective medical costs from a user". Probably, as we do this business, many Kenyans there may not know what it is that we are doing. We are actually coming to the service of many Kenyans; to help them.

Many times, you have a patient admitted in a hospital; he is at the bench. It has been directed that he be admitted, but the hospital demands that a prepayment must be made. In other words a deposit be made before the patient is admitted yet the patient might collapse or die because people are fundraising and looking for money.

I think a person's health and life are more important, as provided in the Constitution. Therefore, it is very important that we, as Parliament, enact this. Doctors and owners of hospitals must not demand prepayments before they admit or treat anyone.

I support this amendment, Hon. Temporary Chairlady.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you.

(Question, that the words to be left out be left out, put and agreed to)

(Question, that the words to be inserted in place thereof be inserted, put and agreed to)

(Clause 4 as amended agreed to)

New Clause 4A

THAT, the Bill be amended by inserting the following new clause immediately after Clause 4—

4A. the principal Act is amended by inserting the following new section immediately after section 12—

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Insertion of a new section 12A in Cap. 241.

Non-detention of patients by health facilities.

12A. (1) A person in charge of a health facility shall not detain, permit or cause the detention of a patient who has been discharged or the body of a deceased patient on grounds of non-payment, whether in part or in full, of hospital bills or medical expenses.

(2) Subject to subsection (1), a person in charge of a health facility shall discharge a patient or release the body of deceased patient from the health facility upon the execution of a promissory note to the health facility to secure the payment of the unpaid hospital bills or medical expenses.

(3) The provisions of this section shall not apply to a patient who is admitted in a private or semi-private room.

Cap. 27.

(4) A person who contravenes the provisions of this section commits an offence and is liable, on conviction, to a fine not exceeding two million shillings.

(5) In this section, "promissory note" has the meaning assigned to it under section 84 of the Bills of Exchange Act.

(The new clause was read a First Time)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Chairman, move Second Reading of the New Clause.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Chairman, I rise to move that New Clause 4A be amended by inserting the following new...

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Chairman, first of all, move that it be read a Second Time.

Hon. (Dr) James Nyikal (Seme, ODM): I beg to move that the New Clause 4A be read a Second Time.

The proposal is that the principal Act be amended by inserting the following new section immediately after Section 12. Earlier, we discussed that we were trying to bring this in Section 7(1), which was dealing with emergency care, and now we are bringing a whole new clause, which is the substance of this Bill.

It reads:

1. A person in charge of a health facility shall not detain, permit or cause the detention of a patient who has been discharged or the body of a deceased patient on grounds of non-payment, whether in part or in full, of hospital bills or medical expenses.
2. Subject to subsection (1), a person in charge of a health facility shall discharge a patient or release the body of a deceased patient from the health facility upon the execution of a promissory note to the health facility to secure the payment of the unpaid hospital bills or medical expenses.
3. The provisions of this section shall not apply to a patient who is admitted in a private or semi-private room.
4. A person who contravenes the provisions of this section commits an offence and is liable, on conviction, to a fine not exceeding two million shillings.
5. In this section, "promissory note" has the meaning assigned to it under section 84 of the Bills of Exchange Act.

Chair, the essence here is that nobody will be detained in hospital because they have not paid any bills. This is something that we have discussed in this House for a long time. It has been a major problem in the country. In fact, our courts have ruled in more than one

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occasion that a body cannot constitute a lien that it be held to enforce payment, and that the patient should also not be similarly treated.

Obviously, there have been arguments that expenses have been incurred in taking care of these persons, whether they die or they are discharged and, therefore, some arrangements should be made for the people who are taking care of them to recover their costs. That is why we brought in the issue of the promissory note. This is actually as in law. A promissory note is a legally binding promise that the person who is being released or the person receiving the body from the hospital will undertake to make payment. That is legally binding. This is important so that the hospital can recover its cost.

Before, we have had the problem where bodies are retained causing a lot of pain. Patients in maternities are detained there together with their children. In fact, in that case…

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you, Dr Nyikal. I know that you are trying to make the House understand. However, we are in the Committee of the whole House. If you can just make it short.

Hon. (Dr) James Nyikal (Seme, ODM): I agree. This is a Second Reading, so let us make it short. That practice of detaining patients is actually expensive. This is because as they stay in hospitals, they still incur expenses. To that extent, this new clause resolves the issue that we have had for a long time.

I beg to move that the New Clause 4A be now read a Second Time. I ask Hon. Baya to second.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Yes, Hon. Baya.

Hon. Owen Baya (Kilifi North, UDA): Thank you very much, Hon. Temporary Chairlady. I concur with Hon. Nyikal, and I second. This is a very fundamental change. I want to read this verbatim. "A person in charge of a health facility shall not detain, permit, or cause the detention of a patient who has been discharged or the body of a deceased patient on grounds of non-payment, whether in part or in full, of hospital bills or medical expenses." This is a common practice. Many times, we Members of Parliament, are called upon to pay bills. Bodies have even stayed in hospital for 12 months because people are raising funds to pay the bills. This new clause is very fundamental. I thank Hon. Nyikal and Hon. Njeri for thinking about Kenyans and bringing this support to them.

The second part reads, "Subject to subsection (1), a person in charge of a health facility shall discharge a patient or release the body of deceased patient from the health facility upon the execution of a promissory note to the health facility to secure the payment of the unpaid hospital bills or medical expenses." The courts have pronounced themselves on this matter. This House and the Cabinet Secretary have also pronounced themselves, but we are now putting it in law so that we can protect the Kenyan hustlers who have to fundraise to discharge their loved ones. Even yesterday, I was busy looking for money to pay for patients and bodies that had been detained in hospital. This is good and very progressive legislation.

I thank you.

(Question, that the new clause be read a Second Time, proposed)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Let us hear Hon. CNN, then we shall come to you Hon. John Kiarie.

Hon. Charles Nguna (Mwingi West, WDM): Thank you, Hon. Temporary Chairlady. Today morning I was handling a certain case with Dr Nyikal in Kenyatta University Teaching, Referral and Research Hospital (KUTRRH), of a patient who has been detained there for two months. The patient is dead and still the body has not been discharged. This has been the order of the day in this country. I am very happy for Hon. Njeri and also the Committee for agreeing to put this clause and sound it very clearly. There should be no detention of patients by health

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facilities in this country. If the patient is healed, release him or her and the bill will not escalate. If the person is dead, why are you detaining bodies in health facilities? It is even not healthy at all. We should support this and make sure it is properly implemented in all our health facilities in this country.

I support.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. John Kiarie, Member for Dagoretti South.

Hon. John Kiarie (Dagoretti South, UDA): Hon. Temporary Chairlady, it must be said that the business that is before us is the reason we are elected to Parliament; to represent our people on issues that affect them. The issue of detaining bodies has been a calamity in this country. As I support the new Clause 4A, I must say that it has been unfortunate that Government health facilities, and even notoriously the private health facilities, have been detaining bodies. When we think about the principle of it, it is utterly wrong. This is because I am responsible for my health and it means then it is my responsibility to be able to know how I shall pay my bills. If I pass on, the transfer of responsibility to somebody else means that these hospitals are playing a very inhumane game. This is because they are saying to a brother or a sister that they are now responsible for the health of a person that is dead. Actually they charge them to a point where families have been submitting title deeds and losing them to hospitals.

As I support this, I honestly have to add that Hon. Njeri, you have done very well to bring this to the House. Hon. Dr Nyikal, you have done extremely well. I must add that the Social Health Authority (SHA) speaks to the issues that we are talking to by praxis. Every Member here will confess that with the institution of the SHA and the bills they are paying, it has become easier for Members of Parliament to deal with these issues. Even as we are making these amendments, we must also celebrate the strides that the country has made with SHA. Nowadays, in the constituency, before I attend any health harambee, I have to ask the constituent if they are registered with SHA. It is for a good reason. It was only a few days back that we were doing harambee for an extra Ksh100,000 for a patient whose bill of up to Ksh800,000 had been paid by SHA.

I thank you, Hon. Temporary Chairlady, Hon. Njeri, and the Committee of Hon. Dr. Nyikal. I also add SHA because it has also come to the aid of our people. Thank you very much.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Rindikiri Mugambi, make the comments quick. Summarise your points.

Hon. Mugambi Rindikiri (Buuri, UDA): Hon. KJ, it is like you are reading my mind because our cardinal responsibility is to respect the dead. When a person is dead, they are dead. Detaining a body does not add value to the hospital. What adds value to the hospital is the money. The body cannot pay! That is the essence of the court saying that you cannot detain a body. If there is any promissory note, it needs to be honoured. Morally, it is wrong for any hospital to hold a body.

Hon. John Kiarie (Dagoretti South, UDA): It is un-African even.

Hon. Mugambi Rindikiri (Buuri, UDA): Hon. Temporary Chairlady, we have to ask why the Ministry of Health, through Dr Nyikal and Hon. Njeri, is agreeing to this. It is because it is universally acceptable now. Things are getting better and we need to act better. We need to join the better side of SHA. We need to ensure that we enhance SHA so that it takes care of these vulnerable people. If we do that, this business of private institutions holding a body will come to an end. Actually, if we improve our public hospitals, this business of private hospitals will start going down. If you go to United Kingdom, for example, you will find that public health institutions are very famous. There is no conflict with private hospitals, but they need to understand that this is not about profit; it is about the moral principle. I thank you.

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(Question, that the new clause be read a Second Time, put and agreed to)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Yes, Hon. Owen Baya.

Hon. Owen Baya (Kilifi North, UDA): Chair, while I entirely agree with the principle behind this amendment, I am afraid we need to revisit New Clause 4A specifically Subsection (3) of the proposed new Section 12A. Chair of the Committee and Hon. Njeri, perhaps, you need to have a discussion and look at the details of this provision.

The provision if this section shall not apply to a patient admitted in a private or semi-private room. I entirely agree with this provision when it comes to a government hospital. However, it contravenes the principle that nobody should be detained. You are saying that if a patient is admitted in a private room in a hospital and is unable to meet the costs and dies, that boday will be detained yet we have said that nobody should be detained.

Second, private hospitals may turn all their general wards into private rooms. In that case, we will not have achieved full justice. Justice must be served in full. Therefore, we need a further amendment. I request the Chair and Njeri to consult so that we can bring an amendment before the House. This provision contravenes the principle and, in fact, defeats the spirit of the amendment. I suggest that we give the Chairman a few minutes to consult with the lawyers present and look at that amendment.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Chair, this is yours. Would you like to speak to it?

Hon. (Dr) James Nyikal (Seme, ODM): The Committee looked at that issue. You will appreciate that this has been a very difficult Bill. In fact, this is the third time it has come before this House, and on each occasion it has failed to pass. This is because of the feeling that expenses are undertaken by private facilities and so on yet when people are discharged, the promissory note may work, but it may also present challenges. The Committee's concern was that a person should not get into a public facility, choose a private room or bed and at the end of the treatment, claim inability to pay when they had the opportunity.

Initially, we thought that it should apply only to public facilities. However, even in private facilities, you will find general wards where patients are accommodated together, while others choose specific rooms that attract a higher charge. For example, if you go to Nairobi Hospital and admit yourself in the North Wing, and later claim that you cannot settle the bill, yet you could have been admitted to the general ward. I think that should be discouraged. As much as we support patients, we must also consider those who may take advantage of the provisions of the law. The law can be abused by either side. People who are genuinely in need will not present this problem. The problem is with the ones who know they can manage payment, but take advantage of the law. They reason that, "Why not go to the best rooms and if I do not pay, someone else will."

That was the principle. I would propose, Chair, that we allow further discussion on the matter rather than limiting the consultation to the Mover and myself. We considered this issue and noted the concerns raised.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Before I come to you, Hon. KJ, what do you say, Hon. Njeri? This is your Bill.

Hon. Njeri Maina (Kirinyaga County, UDA): Chair, I do understand the mischief that Hon. (Dr) Nyikal is alluding to. That people can take advantage of this to access or be admitted in either private or semi-private rooms when medical facilities have general wards. However, in terms of how we have worded it, I can also see how it can be abused by medical facilities, particularly private hospitals, to protect themselves from what we are trying to do here today.

Perhaps we could introduce an amendment to provide that where a patient, by their own choice or consent, is admitted to a private or semi-private room, the provision shall not apply

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to them. At the same time, we also have to protect against abuse of this good piece of legislation. The wording must be changed to ensure that private facilities do not convert their general wards into private rooms to escape the obligations imposed by the Bill.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. KJ.

Hon. John Kiarie (Dagoretti South, UDA): Hon. Temporary Chairlady, I am in total agreement with the submission by Hon. (Dr) Nyikal. He would know because he is a practising doctor. I also agree with Wakili Hon. Njeri. As a House, what we can do to avoid getting stuck here is to introduce the element of an elective choice made by the patient at the point of admission. That would correct the wording that Hon. Njeri is looking for. If we introduce the element of elective choice at admission, we would be able to amend the provision to reflect the patient's decision at that point. This is so that one is not able to change capacities while already admitted. Make an amendment to the clause to be “elective at admission” to solve the malady that Hon. (Dr) Nyikal is trying to cure and the mischief that Hon. Njeri is anticipating.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Gisairo.

Hon. Clive Gisairo (Kitutu Masaba, ODM): Thank you, Hon. Temporary Chairlady. I am trying to understand the proposal by Hon. KJ. If we introduce the word "elective" at the point of admission, then you enter a hospital whose general wards are already full, and the hospital puts you in a private or semi-private ward based on the nature of the emergency; will that be considered elective, or how will it be handled at the point of discharge? The bill will reflect private or semi-private. I raise this because I have encountered a similar incident of a student who was involved in an accident and admitted to a private ward, not by choice, but because the general wards were full and a procedure had to be performed. At the point of discharge, the bill was astronomical. How do we distinguish between a room chosen by the patient and one assigned because of the circumstances?

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Meanwhile, as we get more Members to contribute, make use of this Table. The Chairperson and the Mover, you can exchange ideas so that in the next five minutes we make a decision. Hon. (Dr) Mutunga, and then we come to the Member for Kangundo.

Hon. (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Thank you, Hon. Temporary Chairlady. The matter at hand is very important for the country, particularly as we consider the growth and development of the medical services sector. We need to encourage private investment. All of us here are treated in private hospitals because we have good medical cover.

I would like to share a personal experience. At one time, I was admitted to Nairobi Hospital and had to choose between going to the South Wing, where I would not pay anything, and the North Wing, where I would pay an additional Ksh5,000 per day because the room was slightly above what the cover can take care of. That is what Hon. KJ is referring to as an elective.

I would also like to marry the point brought about by the last speaker. The honourable Member looked at a scenario where somebody is in such state that they may not be able to choose where to go, but there is no room in the general ward. The hospital makes a decision to save life because one of the reasons for investment in this sector is to save life and cause recovery to occur within the shortest time possible.

If the hospital decides to save life, the hospital needs to know as one that saves lives, it needs those *bonga* points. In other words, they can make those choices and the person will be charged as if they were in a general ward. A person may deliberately choose to go to a comfortable private ward and not upon referral. For example, it is a referral case when a person is referred from Meru County to Nairobi Hospital, or Nairobi West Hospital and then they do not have space in a general ward. They should charge them at the rate of a general ward if they

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put them in a private ward. However, we should also allow people who go to hospital, request a private ward and sign up to pay.

I will give an example from the education sector. We are busy killing private investment in education. I will tell you why. It is because we pass laws in this House and say that students whose parents decide not to pay fees in private schools should be given their certificates. What has been happening as a practice is that you can be given a result slip but you cannot access the certificate until you pay. However, you can access any university in this country or abroad with a result slip.

Laws are coming and we are proposing to pass a law to ensure that certificates will be put in the website, and then nobody will pay. Parents will be hopping from one private school to another and we shall kill private investment in education. We shall not be able to compete with other countries as it were. Let us be careful with what we are doing here. Let us promote, preserve, and protect private investment even as we want to improve quality.

Thank you, Hon. Temporary Chairlady.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): I get what you are saying. However, going to education an example is relevant although a bit off. The proposed law for education is slightly different. Members, we are giving more time for this so that a decision can be made on this clause and we move forward.

I want to give a chance to Hon. Fabian Kyule, the Member for Kangundo Constituency.

(Hon. Owen Baya spoke off the record)

Are you good to go? Have you already reached a decision?

Hon. Owen Baya (Kilifi North, UDA): Yes, we have. We are good.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): You are good to go? We have to give people time to comment and not to debate. Hon. Kyule.

Hon. Fabian Muli (Kangundo, GDDP): Thank you very much. Health is very vital to our citizens. especially at this time when we have many outbreaks.

I am in a school of thought where the Committee and the Chair agree that we need to know that equity is equitable. We cannot make laws just about the patient. We also need to understand that a patient came to a facility. What do we mean about investment when we say that a facility has a bill that a patient has not paid? Medicine was used before this bill came, and someone put labour into it.

That brings me to what a Member said that we should avoid a scenario where we kill businesses. What is the practice in this country? You have to pay when you go the Kenya Revenue Authority (KRA) for income tax when we have a deceased person. How is it that you are now telling hospitals that they will not get their money because someone is deceased? This law must capture both sides; we must take care of the patient and the facility. That is the reason we need to ensure that the health sector is working both in government and the private sector.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Rahim, Member for North Imenti. He is the last one as we go back to the Chairman.

Hon. Rahim Dawood (North Imenti, Independent): Thank you.

I disagree with Hon. Fabian and Hon. (Dr) Mutunga. Nobody decides to go to a private wing or die. It is just unfortunate when someone is being admitted to hospital. People who take the sick to hospital can sign up to anything—whether it is a private room, private facility, or whatever. At the end of the day, retaining a body after death is double jeopardy.

First, the family has lost somebody. After losing, the body is retained if they are not well to do to pay the bill. The courts have ruled that the body does not have to be retained because it has no way to pay. As you are aware, bills can go really high even to millions of

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shillings in some cases. Where will the family of a small peasant farmer get the money to pay off?

I agree with the Deputy Leader of the Majority Party, Hon. Owen Baya, that it should be regardless of somebody in a private or semi-private room. It should be for everybody. It is not a blanket statement that everybody will not pay. However, we have to take care of those who cannot afford.

What Hon. (Dr) Mutunga said about certificates, I want to correct it by saying that education certificates need to be released if we are to get our people jobs. My constituency has written to the Ministry of Education too many times requesting it to release certificates. Retaining them will do no good. The schools have thousands of certificates whereas our people do not have jobs.

With those few remarks, I agree with the Deputy Leader of the Majority Party that it is not just for private facilities, but every facility and bed whether private or public.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): As we go to Hon. Tom Odege, I want you to think of a situation where someone has to be isolated in a private room. Hon. Tom Odege, proceed.

Hon. Tom Odege (Nyatike, ODM): Thank you. Health is what we are debating here. We have to be aware that it is a serious area of investment. Being so, it is also prone to exploitation. We have to be very clear when making laws.

I want to go back to what Hon. Owen Baya was talking about. For us to apply this law in a very favourable manner, we have to be very fair to facilities and patients.

I would suggest something as a trained health worker. Retaining a patient in the ward after discharge, which also incurs bills to persons not able to pay is wrong. Let the facility reach an agreement on how their debt can be paid then release the patient to go so that you do not accumulate debt when you cannot afford what is required from you at that moment.

As Hon. CNN was saying, it is not helping the hospital or the patient when we retain you as long as for two good months yet you could not pay for seven days. You are retained for two good months just to accumulate debt. Therefore, if a patient is not able to pay on discharge, I am suggesting that an agreement should be reached. We are all Kenyans and we will not run away from this country.

The discharged patient should be in a position to sign an agreement with the facility on how they will clear debt while at home and not within hospital. You are not able to pay when in hospital yet you are accumulating more debts. Let an agreement be reached, you are released, and given time to clear your debt. You should be free to go home and not retained in hospital. Bodies should be released instantly and unconditionally.

Thank you, Hon. Temporary Chairlady.

(Applause)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): There you are, Hon. Harrison. You know I was looking for you on this side. You can proceed.

Hon. Harrison Kombe (Magarini, ODM): Thank you, Hon. Temporary Speaker. I want to add my voice to this matter.

Retaining a body does not benefit the health facility or the family of the deceased. I have encountered several cases at Kenyatta National Hospital. On one occasion, I had to sign for the release of a body whose mortuary bill had exceeded Ksh200,000. The family could not afford to pay that amount neither could I and it became a huge burden. Keeping a body in the mortuary only causes the charges to continue accumulating. It does not help anyone.

I, therefore, wish to support my colleagues in proposing that bodies should be released immediately. If a body must remain in the mortuary after the bill has been raised, no additional

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charges should accrue for the subsequent days. This would allow families to concentrate on raising the amount already owed.

The same principle should apply to discharged patients. Once a patient has been discharged but is unable to settle the bill, the patient should be allowed to go home, with arrangements made for payment while at home. If the patient is detained, no additional charges should be imposed during the period of detention.

Thank you, Hon. Temporary Speaker.

(Hon. Owen Baya spoke off the record)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Yes, Hon. Baya.

Hon. Owen Baya (Kilifi North, UDA): Hon. Temporary Speaker, as they are trying to agree on the amendment…

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): They seem to have agreed.

Hon. Owen Baya (Kilifi North, UDA): I think Hon. Harrison Kombe has raised a very fundamental issue that we need to reconsider. He has proposed that where a hospital decides to detain a patient, no additional charges should accrue during the period of detention. That is a very important point.

If I own a hospital and I decide Hon. Gisairo has not paid so I choose to detain him, the original bill should remain constant. Otherwise, it amounts to double punishment. You are being punished for failing to pay because you are not being discharged. On top of that, the hospital continues adding detention charges to your bill. As the Member for Meru observed, that amounts to double jeopardy, although the term may not apply outside law.

For instance, if a patient owes a hospital Ksh100,000 and is detained for one month, the bill should remain at Ksh100,000. The amount should not increase simply because you have been detained in the hospital.

We have situations where hospitals detain patients or bodies, and the charges continue accumulating. That amounts to double punishment. You are being punished for your inability to pay, and the additional charges make the situation even worse. The bill could rise to Ksh500,000, and the hospital could eventually seek to attach your property or sell your land. This is happening despite the fact that detaining a patient, in the first place, is illegal. I think Hon. Harrison Kombe has raised a very important point, and we need to consider it carefully.

(The Temporary Chairlady
consulted with the Clerks-at-the-Table)

That amendment needs to be added.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Yes, it needs to be added. Hon. (Dr) Mutunga, do you have an amendment?

Hon. (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Thank you, Hon. Temporary Speaker. I think we need to pay attention to the context in which the drafters will frame this provision.

Not every patient who checks into a hospital is in critical condition or unable to speak for themselves. We should not proceed from the assumption, as suggested by Hon. Dawood, that every patient should be exempted simply because they have been admitted to hospital. Not every patient is in critical condition.

Some patients who check into hospitals are able to speak for themselves. One may even visit a hospital for routine wellness check. We must, therefore, be careful about the wording we use and the circumstances under which a patient is admitted.

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The other issue concerns the distinction between a deceased person and a patient who is being discharged from hospital. Where a person has died, we need to consider that matter separately. Promissory notes should qualify in this case. Therefore, whatever the SHA can pay should be included. I do not know whether we should put it in the law or not, but whatever SHA can pay should be admissible in this particular case. On the other hand, because we have these issues…

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Members, Hon. Mutunga is raising an important point. However, remember that we cannot put everything here. We will be over-legislating. When you are making regulations, you can now include all these other situations, such as how to handle a case of someone who has been found to have COVID-19, and has to be isolated. Again, a case of someone who has been involved in a critical road accident and finds themselves in Intensive Care Unit (ICU) in a private facility. This can be done in the regulations. However, it is important that we put it there now, and then, when expounding further, we can deal with it in the regulations.

Let Hon. (Dr) Mutunga finalise.

Hon. John Mutunga Kanyuithia (Tigania West, UDA): Hon. Temporary Chairlady, in the event that a patient is in critical condition, professional opinion should prevail on where the patient should be hospitalised or treated from. That should not be tantamount to commensurate payment. It is a professional opinion to save life because a hospital is a place to save life, not necessarily to make money. Although making money is also very important for a hospital to sustain itself and progress.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Member for Buuri.

Hon. Mugambi Rindikiri (Buuri, UDA): Hon. Temporary Chairlady, this is a delicate matter, but the principle is the retention of a body. That is the issue, and we need to address it as such. What the leader brought in is important so that we do not leave those people in private wings. If that problem is sorted out, then we are done. However, we are not saying that we kill the private hospitals. No. When it comes to issues of morality, it surpasses any other understanding. That is the basis on which the court ruled. If we stick to that, then we will sort out the problem. However, the way we are conducting this debate makes it seem as though we are saying that this should not be done or that should be done. We are in a contest that nobody is going to win and we shall still go back to the ruling of the court.

Thank you.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): I give Hon. Njeri the chance to move a further amendment.

Hon. Njeri Maina (Kirinyaga County, UDA): Thank you, Hon. Temporary Chairlady. I beg to move:

THAT the proposed new Clause 4A be amended by deleting Subsection (3) and substituting therefor the following-

(Hon. John Kiarie spoke off the record)

The provisions of this section shall not apply if a patient at the time…

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. KJ. Hon. Njeri was right. There was no amendment. It was a new clause. However, you know she likes speaking. The assumption is that Hon. KJ is right. But this time…

Hon. Njeri Maina (Kirinyaga County, UDA): Hon. KJ has misled me before. Thank you, Hon. Temporary Chairlady.

The provisions of this section shall not apply if a patient, at the time of admission, voluntarily seeks admission into a private or semi-private room, except in the case of an emergency or medical necessity.

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I request Hon. Owen Baya to second that.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you. Hon. Owen Baya.

Hon. Owen Baya (Kilifi North, UDA): I second that, and do not think we need to speak much. That amendment speaks for itself.

(Question of the amendment proposed)

Hon. (Dr) Nyikal.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Chairlady, I rise to support that amendment on subsection (3). This is a big issue that we have raised. We have opened the door, and there are going to be a lot more considerations on this. All the issues that people have raised, particularly when somebody dies and you find yourself in that situation, have been taken care of. More importantly, as we get our systems fully operational and the SHA is improving, we may find that some of these issues may no longer arise. However, it is important that we address them.

The issue, for instance, is when somebody is detained. Which bill applies in that situation? Does the bill apply after detention or not? Again, these are issues that can be addressed and reduced. We must protect institutions and citizens equally against abuse. I think that is what we are doing. Therefore, there is room for regulations through which we can examine these matters further. This will also be tied to the benefit package and the tariffs that we use in our financing system.

I support.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you.

(Question, that the words to be left out be left out, put and agreed to)

(Question, that the words to be inserted in place thereof be inserted, put and agreed to)

((Question, that the new clause be added to the Bill, put and agreed to)

Clause 2

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Mover.

Hon. (Dr) James Nyikal (Seme, ODM): Hon. Temporary Chairlady, I beg to move:

THAT, the Bill be amended by deleting Clause 2.

This is basically the definition of emergency and what is being proposed…

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Chair, is that a deletion?

Hon. (Dr) James Nyikal (Seme, ODM): Yes. That deletion removes the new definition of emergency. The amendment proposes that the definition of emergency in the principal Act be retained because it is adequate and more precise.

Thank you.

(Question of the amendment proposed)

(Question, that the words to be left out be left out, put and agreed to)

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(Clause 2 deleted)

(Title agreed to)

(Clause 1 agreed to)

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Hon. Members, we have come to the end of the Committee of the whole House, and we have now finalised consideration of the Health (Amendment) Bill (National Assembly Bill No. 56 of 2024), a very important piece of legislation.

Mover, Hon. Njeri.

Hon. Njeri Maina (Kirinyaga County, UDA): Hon. Temporary Chairlady, I beg to move that the Committee do report to the House its consideration of the Health (Amendment) Bill (National Assembly Bill No. 56 of 2024) and its approval thereof with amendments.

The Temporary Chairlady (Hon. (Dr) Rachael Nyamai): Thank you very much.

(Question proposed)

(Question put and agreed to)

(The House resumed)

IN THE HOUSE

[The Temporary Speaker
(Hon. (Dr) Rachael Nyamai) in the Chair]

MOTION

CONSIDERATION OF REPORT ON
THE LOCAL CONTENT BILL

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Baya, proceed.

Hon. Owen Baya (Kilifi North, UDA): Which one do we start with?

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Start with the Local Content Bill.

Hon. Owen Baya (Kilifi North, UDA): Hon. Temporary Speaker, I beg to report that the Committee of the whole House has considered the Local Content Bill (National Assembly Bill No. 45 of 2025) and approved the same with amendments.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Mover of the Bill, Hon. Jane Kagiri, proceed.

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Speaker, I beg to move that the House do agree with the Committee in the said report. I also request Hon. Rindikiri to second the Motion.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Rindikiri Mugambi, proceed.

Hon. Mugambi Rindikiri (Buuri, UDA): This is a very important Bill. I thank my colleague and good neighbour from where we come from. She has done a good job.

Hon. Temporary Speaker, I second.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you very much.

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(Question proposed)

May I go ahead and put the question?

(Question put and agreed to)

BILL

Third Reading

THE LOCAL CONTENT BILL
(National Assembly Bill No. 45 of 2025)

Hon. Jane Kagiri (Laikipia County, UDA): Hon. Temporary Speaker, I beg to move that the Local Content Bill (National Assembly Bill No. 45 of 2025) be now read a Third Time.

First, I take this opportunity to thank the Hon. Members for the great support they have given this Bill. Their great contributions during the Second Reading provided a lot of input into the amendments. Second, I thank the Departmental Committee on Trade, Industry and Cooperatives because its input has also been considered. Third, I thank all the stakeholders who gave us their input. Specifically, I would like to mention the Kenya Association of Manufacturers (KAM), the Kenya Private Sector Alliance (KEPSA) and many other institutions that made contributions which have greatly informed the amendments.

Finally, I believe this Bill is going to transform this country and give young people in this country an opportunity to get jobs, as well as improve our economy. We will no longer have the repatriation of funds from this country; instead, the funds will be retained within the borders of Kenya.

I now request the Hon. KJ to second.

Hon. John Kiarie (Dagoretti South, UDA): Thank you, Hon. Temporary Speaker. What has happened in this House this morning is historic. Kenya gained Independence in 1963. However, economic independence has been a clamour for over 60 years. What we have done today is to empower entrepreneurs in Kenya.

There are young people, women and persons living with disabilities who have been disenfranchised by the laws as they have been on our books. I must congratulate the Hon. Jane Kagiri, knowing full well that to bring this Bill to the House, there must have been very many forces working against the empowerment of Kenyan businesses against interference by international forces.

We are very happy to have international investment in this country. We are very happy to have private investors doing business in Kenya, including international investors. However, they should not conduct business at the expense of local traders and local business people. In this case, matters relating to local content are about empowering Kenyan business people.

If there is one morning when I was proud to be in this House, it is this morning, when we were empowering Kenyans who are doing business and ensuring that they are not attacked by external powers that are more forceful and, in fact, invest heavily to disfranchise the Kenyan trader. Today is a big win for the very people we were referring to as hustlers during our campaigns. We promised to empower local Kenyan businesses. This is the UDA Manifesto in motion. When people ask where *mama mboga* is, this is where she is. When they ask where the local traders are, this is where they are. I am extremely proud of what this House has done this morning. It has done what our mantra calls us to do: Act for the welfare of our society and the just government of the people. I am a proud parliamentarian today because the hustler in

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Dagoretti, Nairobi and ordinary Kenyans across the country have all been empowered by the law that we have passed this morning. I am very thankful.

Hon. Members: Second.

Hon. John Kiarie (Dagoretti South, UDA): I am very proud this morning. I beg to second.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you, Hon. KJ.

(Question proposed)

(Question put and agreed to)

(The Bill was accordingly read a Third Time and passed)

MOTION

CONSIDERATION OF REPORT ON THE HEALTH AMENDMENT BILL

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Deputy Leader of the Majority Party.

Hon. Owen Baya (Kilifi North, UDA): Hon. Temporary Speaker, I beg to report that the Committee of the whole House has considered the Health Amendment Bill (National Assembly Bill No. 56 of 2024) and approved the same with amendments.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you very much. Mover of the Bill, Hon. Njeri.

Hon. Njeri Maina (Kirinyaga County, UDA): I apologise, Hon. Temporary Speaker. I beg to move that the House do agree with the Committee in the said report. I also request Hon. John Kiarie to second the motion.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. John Kiarie, please proceed.

Hon. John Kiarie (Dagoretti South, UDA): I wish to thank the House. What the House has done this morning is for the benefit of Kenyans, particularly in addressing the malady and tragedy of detaining dead bodies. This even goes against our African traditions. In the Agikuyu community, when a person was deemed to be terminally ill, they would undergo something called *kumagario,* which means being escorted out. The person would be taken into the bush. What would happen is that...

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. KJ, I hope that *kumagario* is in quotation marks.

Hon. John Kiarie (Dagoretti South, UDA): It is in quotation marks, as I am very cognisant of the fact that we have to use English and Swahili in the House. I was just using it for reference. In some African traditions, for example the Agikuyu, when people encountered a terminally ill person, they would adopt what was deemed an environmentally safe means of disposal, which was to escort the terminally ill person away. There were mechanisms where if such people survived, they would find their way back home and would even be regarded as having resurrected. What we have done this morning is very much in line with humanity. It is in line with our cultures, and it is also the right thing to do to ensure that hospitals do not detain bodies. As I had said, it is not the responsibility of a body to settle hospital bills. In fact, it is against humanity for hospitals to detain bodies for commercial interests. I congratulate Hon. *Wakili* Njeri. This is what the people of Kirinyaga sent you here to do. Some of the people you

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represent, as you fully know, are family. Today, Kirinyaga is very proud of this first-term Member of Parliament who has brought a very consequential Bill to this House. Congratulations for fighting through the processes. We must also thank the Departmental Committee on Health. We must thank Hon (Dr) Nyikal, a very accomplished medic who understands the situation and has represented his people well. He brings to this debate not only his medical expertise but also his understanding of humanity as the representative of the people of Seme.

Hon. Temporary Speaker, thank you. I beg to second.

(Question proposed)

The Temporary Speaker (Hon (Dr) Rachael Nyamai): May I go ahead and put the Question?

(Question put and agreed to)

Mover of the Bill.

BILL

Third Reading

THE HEALTH (AMENDMENT) BILL
(National Assembly Bill No. 56 of 2024)

Hon. Njeri Maina (Kirinyaga County, UDA): Hon. Temporary Speaker, I beg to move that the Health Amendment Bill (National Assembly Bill No. 56 of 2024) be now read a Third Time.

Hon. Temporary Speaker, allow me to thank the Departmental Committee on Health. I initiated this Bill immediately I took oath of office. So, you can imagine how long it takes for a Private Member's Bill to get to this stage. It is very important that we look and address these issues. The courts have already declared themselves on the matter. They have said that bodies can never be used or held as liens for monies owed to medical facilities. The High Court made this ruling, and the Court of Appeal cemented that precedent. However, medical facilities continue to detain patients and bodies to demand payment.

(Loud consultations)

The Temporary Speaker (Hon (Dr) Rachael Nyamai): The three Honourable ladies on my left - in the most important row - please consult in lower tones.

Hon. Njeri Maina (Kirinyaga County, UDA): This is a very critical Bill. Nevertheless, the courts have decided and cemented the precedent that body cannot be detained. You also cannot detain a patient and demand for monies prior to emergency medical attention. It is, therefore, upon this House to codify this into law because medical facilities continue to abuse the lack of codification in the law and requirement that this is adhered to.

Hon. Temporary Speaker, allow me to also thank the Budget and Appropriations Committee that was chaired at the time by Hon. Ndindi Nyoro. We had several engagements between the committees before this piece of legislation could finally come before this House. The former Chairman of the Departmental Committee on Health, Hon (Dr) Robert Pukose, also had a great input in this Bill. I wish to recognise Hon. (Dr) Nyikal as the most important driver

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of this Bill, having taken it up as though he was the one tabling it on the Floor. This is what it means to represent Kenyans.

We must speak to their interests and protect them, even when sometimes there is overbearing interest from private and public players in medical facilities. I have done several *pro bono* cases demanding that medical facilities release detained patients and bodies. The rationale behind this Bill is the legal work that I did as a young lawyer immediately after my admission to the Bar and prior to being elected as a Member of Parliament. Unfortunately, as recent as last week, we had a young lady called Clare, who was detained at the Kenyatta University Teaching, Referral and Research Hospital over an unpaid bill of over Ksh3 million. It is not a matter of such families refusing to pay; they are not able to pay. They do not have the financial capacity.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Order Hon. Njeri. This is Third Reading. Make your comments very brief. I know you did a lot of good work.

Hon. Njeri Maina (Kirinyaga County, UDA): I am winding up.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Please wind up.

Hon. Njeri Maina (Kirinyaga County, UDA): It is because of this that we must pass this law.

As I wind up, and as the courts have said, we must separate debt from issues of burial. We must also recognise that creditors do not hold lien over bodies. We must also recognise the right to dignity as provided in Article 28 of the Constitution and the right to health, as provided in Article 43 of the Constitution of Kenya.

Thank you, Hon. Temporary Speaker. I request Hon. Owen Baya to second the Bill.

Hon. Owen Baya (Kilifi North, UDA): Thank you. I beg to second the Third Reading of the Bill.

Hon. Millie Odhiambo-Mabona (Suba North, ODM): On a point of order, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): What is out of order Hon. Millie Odhiambo?

Hon. Millie Odhiambo-Mabona (Suba North, ODM): Thank you, Hon. Temporary Speaker. Perhaps you can guide. I was getting a little bit confused when Hon. Njeri was moving. At some point, Hon. Temporary Speaker, you said that this is Third Reading so she needs to be brief. She has now called somebody to second. It is a very good Bill which I support. But can we please know at what Stage it is? I would like to contribute to support it.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Baya can proceed and any other person who wants to comment can do so. Proceed but please make brief comments.

Hon. Owen Baya (Kilifi North, UDA): Thank you Hon. Temporary Speaker. I want to inform the lady I admire very much, Hon. Millie Odhiambo - the lady in the smallest part of my heart - that when she comes here, she needs to listen first then she will get along. Hon. "Full Network" has been engaging her since she walked in. Now she wants us to explain to her. But, I love her. So, she should not worry. I will explain to her.

I want to congratulate Hon. Njeri and the Chairperson of the Committee for doing tremendous work and for thinking on behalf of Kenyans and coming out to stand for Kenyans. This is a very good piece of legislation. Henceforth, as we wait for assent of this Bill, we do not want to see any hospital detain a body; we would not like to see any person who has been treated and discharged being detained because they are not able to pay the bill. This is a very good piece of legislation from a progressive mind of Hon. Njeri. Experience gives one content when it comes to parliamentary issues.

I also want to add, and I would like Hon. Nyikal to listen to this. Is it possible, because these hospitals, apart from Level 6, are managed by county governments as we come to budget… Hon. Beatrice Elachi, let the Hon. Member listen to this a bit. Probably, I will give

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him one good idea. He cannot listen to you and listen to me. When we do the budget for health, we should legislate that county governments need to put an ex gratia fund for health so that families that are unable to pay, before we come to the stage where they must be released, have a social worker who is able to assess the family background and see whether the person is able to pay or not, so that the ex gratia fund within the county government health fund offsets bills of poor people.

Where I come from, many times I refer patients for a waiver. There is an officer who does the family background and a waiver of say Ksh12,000 is done and the family pays the rest or the Member of Parliament helps to pay. Is it possible as we pass Funds like the Kenya Rural Roads Authority (KeRRA) and Kenya Urban Roads Authority (KURA) we infuse something called ex gratia for every hospital, so that patients who go to hospitals and are unable to pay their Bills are assessed by a social worker who can – based on their poor background – recommend that ex gratia payments be made on their behalf and the Government offsets their bills from the ex gratia Fund? That will give us relief.

However, it will be a different matter for those who choose to go to private hospitals. For those who choose to go to Level 4 and Level 5 hospitals, the Social Health Authority (SHA) will come in to pay a certain percentage and the percentage that remains for a patient to settle will be taken care of by the ex gratia fund. That will be progressive. We will not have cases of people having to fundraise. We will have SHA managed by its leadership team under the oversight of the Ministry of Health at the national level and at the county governments level there will be an ex gratia fund. The County Executive Committee Member (CEC) for Health will approve ex gratia payment to come from the ex gratia kitty of the county government. That will help avoid the challenge that poor people face. It will be a good piece of legislation that will help, when we are doing the budgets. If Ksh20 million or Ksh30 million is put for SHA, it will cushion the poor people in this country on health matters. I support and second the Third Reading.

I thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Thank you for seconding.

(Question proposed)

Well, I give the first opportunity to Hon. Millie Odhiambo.

Hon. Millie Odhiambo-Mabona (Suba North, ODM): Thank you, Hon. Temporary Speaker. Let me take this opportunity to congratulate Hon. Njeri for this good Bill. She has been on this Bill for a long time. I have realised that part of the reasons why I am confused is that I felt like I had contributed to the Bill. I actually contributed to it in the Budget and Appropriations Committee when I was still its member.

This is a timely Bill. It seeks to entrench rights and freedoms in the Constitution. We cannot give constitutional rights with one hand and take them with the other hand. I am not too sure about detaining of bodies. It basically helps families psychologically to let their deceased persons rest in peace. I agree with her fully on detaining persons because they have not met the hospital bills.

This is a good Bill. It will go a long way in helping families. Despite the fact that we are in different political spaces with Hon. Njeri, she is moving very well. I know my party cannot find a candidate in her county and win. So, I am very happy to wish her the very best and hope that she recaptures her seat. I know Hon. Fatuma is saying, why not? As we know, the nature of Kenyan politics is like America's blue and red even though there was a major upset this time. So, you never know. ODM might get a seat in Nyeri for the first time or bring Hon. Njeri to ODM. Congratulations to her for the excellent work. She should keep up the good spirit. I support.

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The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Beatrice Elachi.

Hon. Beatrice Elachi (Dagoretti North, ODM): Thank you very much, Hon. Temporary Speaker. I also rise to congratulate Hon. Njeri. One of the things that I can tell you, Hon. Njeri has done for us in the urban cities with constituencies that have many challenges… In Nairobi, a body can stay for three or six months in a mortuary just because the family is unable to pay the hospital bill that accrues. These are families that struggle with chronic diseases. Families with cancer and diabetes patients that have toiled with the disease for years go through a lot. So, I want to thank you. I would like to tell Kenyans that, indeed, there are good Bills that have come from the 13th Parliament. I know that sometimes Kenyans get very disappointed. Most of the Bills ensure that citizens get reprieve by trying to bring the cost of living down. These are some of the few things we do.

The other challenge families face is rushing to private hospitals. There is need for the Government to create a lot of awareness on how SHA works. This is to ensure that they do not go to a private hospital first. Kenyatta University Teaching, Referral and Research Hospital (KUTRRH) is more private. When a patient is in a private hospital and the bill is Ksh3 million, trust me, it will strain the family.

I beg to support. I pray that the Bill is assented to and becomes an Act so that many Kenyans benefit from it. Thank you, Hon. Temporary Speaker. I also thank Hon. Njeri. I wish her well in Kirinyaga.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): The Hon. Member for Imenti North.

Hon. Rahim Dawood (North Imenti, Independent): Thank you, Hon. Temporary Speaker. I join my colleagues in congratulating Hon. Njeri. She mentioned that her Bill has taken three years to reach this stage. The Bill is now headed to the Senate. I hope after the Senate passes it, we will not have what befell my Bill with a memorandum.

Hon. Nyikal is aware that my Health (Amendment) Bill passed through the National Assembly and took more than two-and-a-half years. It passed the Senate in another one-and-a-half years. Finally, when it landed on the desk of the President, unfortunately, it was sent back with a memorandum cancelling every clause of the Bill. So, the Bill died. There was nothing to be signed. So, I hope and pray that Hon. Njeri's Bill does not suffer the same fate.

I request the Chairperson of the Departmental Committee on Health to make sure that the mandarins at the Ministry of Health do not demolish the whole thing. It is not the President himself per se. It is his advisors on health who tell him what is not right and cannot work, and the essence of a Bill gets lost.

Secondly, the Deputy Leader of the Majority Party, Hon. Owen Baya, mentioned that we should have ex gratia payments. I agree completely with him. If county governments have to waive, we need to give them conditional grants from the national Government for the same. We cannot expect a county government to go into its coffers and make ex gratia payments. Whenever it is possible, they assist us. But then their coffers are dry, let the Chairman of the Departmental Committee on Health look at that with the Budget and Appropriations Committee and propose that we do a conditional grant just for ex gratia payments. That will go a long way in assisting our people.

With those few remarks, I congratulate my sister and wish her all the best. Let her follow the Bill as it goes to the Senate because there are times Bills from here are never debated until it is too late. We will be going to elections. So, we only have a few months my sister. Let her make sure that it is debated fast. Let her also ask the Senate not to make any changes. Otherwise, we will go to mediation and by the time we finish mediation, elections will be on and we would not have done anything.

Thank you, Hon. Temporary Speaker. I support.

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The Temporary Speaker (Hon. (Dr) Rachael Nyamai): The Hon. Basil, Member for Yatta.

Hon. Robert Basil (Yatta, WDM): Thank you, Hon. Temporary Speaker. I also want to add my voice to thank my sister. Hon. Njeri is a member of the young Members of Parliament. This is a very instrumental Bill and we really appreciate. I make a case in point where I had a family that had the body of their loved one detained for more than three months at KUTRRH. You can imagine the struggle that family went through to have the body released. I actually had to write to the CEO of the hospital and tell him that we appropriate some resources from this House to go to KUTRRH and other hospitals that tend to operate like private hospitals.

Therefore, this is a very important Bill. It will serve as a great relief to many struggling families particularly when it comes to paying for medical bills. I really appreciate and thank Hon. Njeri for bringing this Bill. We hope that it will sail through in the Senate.

Thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Member for Embu County.

Hon. Pamela Njeru (Embu County, UDA): Thank you, Hon. Temporary Speaker for this opportunity. From the outset, I support Hon. Njeri Maina, Woman Representative for Kirinyaga County for this very important Bill. Most of us, as leaders, are constantly called for harambees in our constituencies and wards because of this important issue that has been brought to this House by Hon. Njeri Maina. Bodies are detained in hospitals for weeks and months. As I was seated here, I received a message that there is a family from Gaturi South Ward in Embu County with a body that has been in hospital for more than three months. They require Ksh1.2 million. My prayer is that when this Bill goes for assenting, it will go through so that we do not kill the baby at this level.

As much as I support this Bill fully, I also call upon the county governments… We know that health is devolved. Members have talked about things like ex gratia and conditional grants from Members of Parliament. How can these be factored in as fast as possible during the Budget process? This will ensure that when this Bill is passed, whenever we have such cases of patients and bodies being detained, there will be a kitty. It is my hope that this Bill does not end her; that it will be signed into law and there will be enough money to ensure that when there are such cases, the bodies can be released on time for the families to bury their loved ones. We very well know that the more the body is detained in the hospital, the more it accumulates bills and debts. Therefore, the earlier it is done the better. This will ensure that we close that chapter of detaining bodies in hospitals and move on.

I support this 100 per cent. I will wait for it to be assented into law. Thank you.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Chairman, Departmental Committee on Health.

Hon. (Dr) James Nyikal (Seme, ODM): Thank you, Hon. Temporary Speaker. First of all, I really congratulate the Mover, Hon. Njeri. I also appreciate this House because this is the third time we have had this Bill. This time it has passed.

The issue of ex gratia and conditional grants can be a temporary measure. Currently, when we have our Budget process, we often consider Level 6 hospitals. They show us the money they have spent on waivers and we compensate them, but not in a structured manner. If we have been dealing with this temporary measure, then the conditional grant would be a better way to do it. But as we do that, the answer to this is making the proposed financing system we have put in place work. About 30 million Kenyans have registered with SHA, but less than six million of them have registered in the insurance space. If we do that and strengthen SHA, this is something that will take care of it. In fact, our whole policy on Universal Health Coverage (UHC) is based on protecting families from catastrophic spending. Such spending occurs when

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you pay hospital bills to secure the release of patients or bodies from hospitals. This House has moved a step further by addressing that problem. However, we must also look at the funding system. I like what has been proposed. Let us pay the SHIF, which is a component of SHA, so that these bills can be settled.

People may say that the system is not working, but we have a new system that is experiencing challenges. Let us bear with the teething problems, support it and pay into the insurance scheme so that funds are available and everything can be covered. The benefit package is something that can be reviewed. This is a great opportunity we have opened up in the financing system to support families. However, we must look at the broader picture and consider how to make the system work fully. I hope that in future, this Bill will not even be necessary because we will be able to pay for our people. At this point, however, the country needs it.

Once again, I thank the Mover and the House for passing the Bill. I support it in the Third Reading.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Can I go ahead and put the Question now?

(Hon. (Dr) James Nyikal spoke off the record)

Yes, Hon. Gisairo has been here with a lot of interest in this Bill. We can give him the final opportunity to contribute.

Hon. Clive Gisairo (Kitutu Masaba, ODM): Thank you, Hon. Temporary Speaker.

(Hon. Dick Oyugi consulted loudly)

Have you finished interrupting me?

Hon. Dick Oyugi (Luanda, DAP-K): You can continue.

Hon. Clive Gisairo (Kitutu Masaba, ODM): Thank you. Let me join the rest of my colleagues in congratulating Hon. Jane. This is a great piece of legislation.

Listening to all the Members, it is clear that this is an issue we face every day, as our constituents come to us with complaints about patients or bodies being detained in hospitals. Today, I received a bill from a close constituent whose relative had been detained at a Nairobi hospital. At the point of discharge, the bill stood at Ksh234,000. Less than two weeks later, it had risen to over Ksh400,000. Hospitals are not only charging for beds, which are covered by SHA, but are also adding charges for doctors' visits. My first question was: What was the doctor visiting to tell a patient who had already been discharged?

Many of these hospitals do not honour court orders because they know there is a gap in the law, which they have been capitalising on. Hon. Jane has ensured that we are plugging that legislative gap. Once we have legislation in place, it will be easier to enforce some of these court rulings. We must ensure that once patients have been discharged, they are released to their families. Where a patient has died, the body should be released to the family so that they are not subjected to further anguish when they should be making arrangements to lay their loved one to rest. These are the kinds of progressive Bills we want in this House, as they ensure that those who are less fortunate in society are protected from exploitation.

Lastly, some people may ask why one would take a relative to a private hospital. We live in Kenya, where health workers in our public health facilities go on strike almost every year, and at such times, a patient still needs medical attention. That is how sometimes people find themselves in private hospitals. It is not because they chose them but because circumstances demanded so. This legislation covers both private and public facilities to ensure patients and families are not exploited.

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I thank you, Hon. Temporary Speaker, for giving me this opportunity to contribute. I congratulate Hon. Njeri for this great piece of legislation.

(Question put and agreed to)

(The Bill was accordingly read a Third Time and passed)

Next Order.

MOTIONS

INCLUSION OF AFLASAFE KE01 IN THE NATIONAL AGRICULTURAL INPUT SUBSIDY PROGRAMME

THAT, aware that, Article 43(1)(c) of the Constitution of Kenya guarantees every person the right to be free from hunger and to have adequate food of acceptable quality; cognisant of the fact that, aflatoxin contamination, caused by toxic substances produced by certain fungi, remains a significant public health, food safety and economic threat in Kenya, with exposure associated with acute poisoning, chronic liver damage, cellular DNA damage and an increased risk of liver cancer; noting that, surveillance data has demonstrated widespread aflatoxin contamination in Kenya's staple foods, particularly maize and maize products, as well as animal feeds and other food products, with some samples recording aflatoxin levels substantially above the national permissible threshold of 10 parts per billion; acknowledging that biological control technology, particularly Aflasafe KE01, developed locally by the Kenya Agricultural and Livestock Research Organization (KALRO) in collaboration with the International Institute of Tropical Agriculture (IITA), using safe and non-toxic indigenous fungal strains, provides a scientifically validated and field-proven pre-harvest intervention for the prevention and control of aflatoxin contamination; further acknowledging that, field applications of Aflasafe KE01, including large-scale demonstrations at the Galana-Kulalu Irrigation Scheme and in Meru County, have substantially reduced aflatoxin contamination in harvested maize; concerned that, despite the local manufacture of Aflasafe KE01 at KALRO *Katumani*, the application cost, estimated at approximately Ksh1,000 per acre, remains a significant barrier to adoption by smallholder farmers, who constitute the majority of Kenya's agricultural producers; recognising the need for a preventive and integrated approach to food safety that addresses aflatoxin contamination at the farm level while strengthening public awareness, agricultural extension, food surveillance and health monitoring; now therefore, this House resolves that the National Government, through the Ministry of Agriculture and Livestock Development, incorporates Aflasafe KE01 as a subsidised biological agricultural input under the National Agricultural Input Subsidy Programme, prioritises its targeted provision and application in high-risk Agro-ecological zones and identified aflatoxin-endemic hotspots, particularly in the Eastern and Coastal regions, major irrigation schemes and other areas with a demonstrated history of aflatoxin contamination.

(Moved by Hon. (Dr) John Mutunga Kanyuithia on 4.11.2026 – Morning Sitting)

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(Resumption of debate interrupted on 4.11.2026 – Morning Sitting)

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Members, on this particular Motion, Hon. Gathoni Wamuchomba was on her feet and had a balance of eight minutes. In her absence, anyone else is free to debate. Hon. Dick Maungu, Member for Luanda.

(Hon. Dick Oyugi spoke off the record)

Sorry, you do not want to debate on this Motion. Thank you,

Hon. Dick. Hon. Emmanuel Wangwe, Member for Navakholo.

Hon. Emmanuel Wangwe (Navakholo, ODM): Thank you, Hon. Temporary Speaker.

The Temporary Speaker (Hon (Dr) Rachael Nyamai): I would like to inform Hon. Dick Maungu, Member for Luanda, that those who intended to comment on the Bill that has just passed needed to press the intervention button. I think you did not have that information.

You may proceed, Member for Navakholo.

Hon. Emmanuel Wangwe (Navakholo, ODM): Thank you, Hon. Temporary Speaker. Allow me to join the rest of my colleagues in supporting this Motion by the Chairperson of the Departmental Committee on Agriculture and Livestock in his capacity as the Member for Tigania West.

This Motion seeks to include these specifications in helping the country save itself from the agony and destruction caused by aflatoxin. At the outset, aflatoxin is another roadmap to the creation of cancer in our bodies. It comes in a slow motion until it embeds itself into the human cells. KALRO, our own research institution, came up with these specifications of Aflasafe KE01 which is a method that will help us in understanding and overcoming the issues and challenges caused by aflatoxin.

Aflatoxin can be avoided if we handle our agricultural produce in a safe and hygienic way. Article 43 1(c) of the Constitution gives us the right to be free from hunger, and to have adequate food of acceptable quality. Cognisant of that fact, aflatoxin goes against the standard that the Constitution gives to Kenyans to enjoy. If we pass this Motion, I urge my good friend, Hon. (Dr) Mutunga, to move and actualise it into a Bill. This will help us to safeguard the penetration, curation and the way we handle the issues caused by the fungi found in aflatoxin. We need to look at how aflatoxin affects not only human beings through the consumption of maize, but also animals. We are human beings who consume meat, which is an animal product. If animals consume substances contaminated with aflatoxin, the contamination can also find its way into our bodies when we consume their meat.

Therefore, this proposal has a cost implication. As provided for in the Motion, if we are to implement this intervention at Ksh1,000 per acre, that would be a significant cost. We must consider that many Kenyans live on less than one dollar a day. Therefore, Ksh1,000 is a substantial amount. Could we ask the Budget and Appropriations Committee to consider reducing this cost through subsidies if the Motion is to be implemented?

What has the current administration done? The current administration has not focused on improving prices through supply-side subsidies. Instead, it has focused on subsidising production costs by reducing the price of fertiliser from Ksh7,000 to Ksh2,000. Fertiliser is a primary input in maize production. If the Government now subsidises Aflasafe KE01, it means that the entire production chain, from the farm to storage and eventually to the market will be covered.

We cannot subsidise fertiliser, allow farmers to produce maize and then fail to ensure that they can sell it because the maize is contaminated with aflatoxin and has to be destroyed. This is, therefore, a good move. I urge my colleagues to support this Motion so that Aflasafe

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KE01 can become part of the cost of production, not only at the farm level but also at the storage stage. The difference with this proposal is that it seeks to subsidise production costs at the storage stage. This will ensure that safe maize is available on the shelves at a lower cost. Therefore, I urge the House to support this Motion by Hon. (Dr) Mutunga on the basis that it is very important. Food is very important. It is paramount.

The challenge with aflatoxin is that it does not matter whether you mill the maize or consume it as green maize. The aflatoxin remains in the maize itself. Changing the form in which the maize is consumed does not necessarily protect consumers from exposure. I beg to support.

Thank you, Hon. Temporary Speaker.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Next is Hon. Clive Gisairo. Actually, Hon. Gisairo and Hon. Rindikiri Mugambi have left.

Hon. Members, I will now call upon the Mover to reply. Hon. (Dr) Mutunga, you can proceed.

Hon. (Dr) John Mutunga Kanyuithia (Tigania West, UDA): Thank you very much, Hon. Temporary Speaker.

I rise to reply and urge the House to adopts the Motion on the inclusion of Aflasafe KE01 in the National Agricultural Input Subsidy Programme.

Hon. Temporary Speaker, a lot of information has come to the fore regarding the extent to which Kenyans are suffering from the consumption of grains contaminated with aflatoxin. It has been clearly established that aflatoxin is carcinogenic. We, therefore, have an opportunity to prevent this cancer-causing agent from entering our food system.

I know that some people may argue that they can cook ugali at very high temperatures or boil water intensively to eliminate aflatoxin. Unfortunately, aflatoxin is heat-resistant. There is no level of boiling that can kill the fungi. The fungi are heat-resistant; therefore, it will still be found in the food.

Hon. Temporary Speaker, the application of Aflasafe KE01 is very simple. It involves broadcasting it on growing maize, and it is supposed to fall on the soil. The fungi are found in the soil; therefore, this will introduce biological control in the form of another fungus that is safe for us, which will reduce the amount of lethal or toxic fungi getting into our food system. Maize is one of the main targets, and groundnuts are another. If you look at Kenya, where maize is our staple food, then we are at risk of the carcinogenic effects of aflatoxin.

Many Members have spoken on this matter, and I wish to thank all of them for contributing positively to the adoption of this Motion, towards inclusion of Aflasafe KE01. Many questions came up, and most of them were supportive. I will respond to one or two. One of them was whether the fungus is native or comes from outside Kenya. I wish to state categorically that this fungus is found in our soils and is not imported from anywhere. Many scientists, including journals written as recent as 2021, have confirmed this. Even in 2016, we had several publications confirming the same. This fungus is found in Kenya.

The other issue is whether the strains cannot produce aflatoxins and whether they can be undone. In other words, whether mutation can be an issue such as in this case, where they mutate. From the studies available, the DNA of this fungus does not change. Therefore, there is no mutation.

On whether recombination is also possible, whatever treatment is given before Aflasafe KE01 is produced, has been found that the resultant Aflasafe cannot mutate further. Therefore, it is possible to use it to protect ourselves, in terms of, our stored grain, animal feed, milk, meat and soil.

On whether the KALRO has the capacity to supply it, indeed they have the capacity. This work has been going on for a long time. Published papers indicate that, by 2023, KALRO was able to produce five tonnes of Aflasafe KE01 per day. That is the amount that can be used

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to treat 500 hectares, which means that KALRO has the capacity to produce enough Aflasafe KE01 for us.

What about the food that is already on the shelves? We cannot apply Aflasafe KE01 to food that is already on the shelves. That is why we have to apply it on the farm, where the fungus is found in the soil. Therefore, the food will contain the fungus if it has not been controlled at the soil level. What can be done in this case, where food is already stored, is to seek guidance and support from the Kenya Bureau of Standards (KEBS), because their analysis will establish the levels of contamination which will dictate whether that food is safe or unsafe for human consumption. The threshold for contamination is 10 parts per billion. If contamination is above 10 parts per billion, then it means that the food is not safe for human consumption.

The other question that came up, and which I wish to address as the last, is whether exposure has any effect on the environment. Aflasafe KE01 is safe for the environment, humans and animals. Therefore, the adoption of Aflasafe KE01 together with the farm input subsidy programme would ease its adoption and utilisation. The reason is that it is not very cheap for farmers. Otherwise, we would simply recommend that farmers buy it. Most farmers do not know the dangers. It is we who understand the dangers now that we know and we all want to prevent it, and we all eat ugali, anyway. So, we would like to be protected. We would also like our people protected through the use of this Aflasafe, which is produced by our institution. I said last time that Kenya does not use as much as other countries. Uganda is using more Aflasafe than us. It is important that we, as the country of origin, need to promote utilisation of Aflasafe.

With those remarks, I beg to reply.

(Question put and agreed to)

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Next Order.

NATIONAL SENSITISATION AND SUPPORT FOR COMBATING SICKLE CELL AND HAEMOPHILIA DISEASES

THAT, aware that Article 43(1) of the Constitution entitles every person to the right to the highest attainable standard of health, which includes the right to health care services; further aware that, every year, an estimated 14,000 children born in Kenya suffer from sickle cell and Haemophilia diseases, with the highest prevalence rate being within Western, Nyanza and Coastal Regions; concerned that, failure to undertake sickle cell and Haemophilia screening at birth hinders timely administration of appropriate treatment and other mitigation measures to forestall high infant mortality caused by preventable diseases like malaria; cognizant that, national population surveys does not include data on sickle cell and Haemophilia diseases; concerned that, the dearth of data and information negatively hinders prioritization of resources and implementation of sickle cell disease management programs; recognizing that, the number infant deaths caused by the disease continues to grow as a result of underfunding due to lack of data on the number of cases of the killer disease; now therefore, this House resolves that the National Government, through the Ministry of Health, and in conjunction with county governments–

1. conducts awareness and sensitisation programmes on sickle cell and haemophilia diseases and supports research and training for medical personnel on the two diseases; and

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2. puts in place measures for mandatory screening of newborns for sickle cell and haemophilia diseases in all public health facilities in the country in order to create a database to guide funding and other interventions aimed at curbing the diseases and reducing infant mortalities resulting from the diseases.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Members, I would like to find out whether Hon. Peter Nabulindo is in the House. In the absence of Hon. Peter Nabulindo, Order 10 is hereby deferred.

(Motion deferred)

BILL

Second Reading

THE TRAFFIC (AMENDMENT) BILL
(National Assembly Bill No. 14 of 2026)

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Robert Basil, Member for Yatta, please proceed.

Hon. Robert Basil (Yatta, WDM): Hon. Temporary Speaker, I rise to move the Traffic (Amendment) Bill, 2026, which intends to amend the Traffic Act Cap. 403, by inserting a new subsection 107(A), which will literally put the Bill…

Hon. Owen Baya (Kilifi North, UDA): On a point of order.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): What is out of order, Deputy Leader of the Majority Party?

Hon. Owen Baya (Kilifi North, UDA): I may be wrong, but Hon. Basil needs to move this Bill properly, using the correct wording. Perhaps the Clerks-at-the-Table can guide him.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): You may approach the Clerks-at-the-Table.

Hon. Robert Basil (Yatta, WDM): Let me read it as it is written.

I beg to move the Traffic (Amendment) Bill, 2026, an Act of Parliament to amend the Traffic Act and for connected purposes, enacted by the Parliament of Kenya as follows….

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Hon. Basil, please approach the Table.

Hon. Robert Basil (Yatta, WDM): I beg to read…

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Please approach the Clerks-at-the-Table.

(Hon. Robert Basil approached the Clerks-at-the-Table)

Hon. Robert Basil (Yatta, WDM): Sorry for that hiccup.

I beg to move that the Traffic (Amendment) Bill (National Assembly Bill No. 14 of 2026) be now read a Second Time.

As I have indicated from the outset, this amendment is meant to amend the Traffic Act, Cap. 403, which is the principal legislation governing the use of motor vehicles and other traffic on Kenyan roads.

We intend to introduce a new subsection 107(A), which will cap the number of hours a vehicle or a motorbike can be detained by police officers. We are also going to provide for a

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limit of 14 days within which investigations can be conducted by traffic officers. This amendment will cure a number of issues that tend to happen in traffic and at police stations.

If you go to police stations, there is congestion. You will find that vehicles and motorbikes are detained for a specified period of time. One can only imagine the vandalism that takes place in police stations.

Additionally, holding the motorbikes results to loss of income, yet most of them are acquired through loans. When one detains a motorcycle or a motor vehicle, they deny the owner of that asset an opportunity to earn an income.

The loss of income that most of the owners undergo contributes to impoverishment. That is why this amendment is essential. Importantly, there is also the issue of damage to the vehicles. If an engine is not run for more than six months, it tends to get damaged. So, one literally loses his or her asset. That is why this amendment comes at the right time to address this vice.

Police officers tend to collude with auctioneers, and you find that a lot of movable assets, including motor vehicles and motorbikes, are auctioned at the expense of their owners. This Bill is very essential because, through it, we will be able to address this challenge which most struggling Kenyans face.

Hon. Temporary Speaker, the storage costs that come with the storage of movable assets, such as motorbikes and motor vehicles, are something that this legislation or amendment, is going to address. You can imagine incurring storage costs for a motorbike or a vehicle that has been detained for an unspecified period of time, because Traffic Act, Cap. 403 is silent on the period for which a movable asset should be detained at a police station. That is why Members of this House should join hands with me to ensure that this amendment sails through and goes all the way to enactment.

There is an element of accountability for safety in custody. This legislation requires the officer in charge of a police station to take reasonable care to preserve detained vehicles and motorcycles. Importantly, through the new section that we are introducing, particularly subsection (3) of this legislation, it is stated that a police officer in charge of a police station where a vehicle or motorcycle is detained shall take reasonable care for the preservation of that vehicle or motorcycle. Subsection (4) of the same legislation states that nothing under this section affects the power of the court to make an order under section 121 of the Criminal Procedure Code to be able to have the particular assets presented in court.

The Bill does not delegate legislative powers. However, the Bill limits the right to property under Article 40 of the Constitution, to the extent that a police officer may detain a vehicle or motorcycle for purposes of investigating an offence and using it as evidence in the trial of an offence committed under the Traffic Act, Cap. 403. The Bill does not concern county governments in matters under Article 110(1) of the Constitution.

Paragraph 7(b) of Part 1 of the Fourth Schedule to the Constitution provides that police services, including criminal law are a function of the national Government. That is why this legislation, in whatever way, does not concern county governments. I also want to make it clear that this legislation is not a Money Bill. This means that, under Article 114 of the Constitution, the enactment of this Bill may not occasion additional expenditure of public funds. That is why this legislation is very salient on matters concerning the constitutional protection of property. This legislation temporarily balances the enforcement of rights. That is, police seizure should not violate citizens' constitutional right to property under Article 40 through unreasonable deprivation.

With those remarks, I beg to move the amendment to the Traffic Act and request Hon. Maungu, the Member for Luanda to second.

The Temporary Speaker (Hon. (Dr) Rachael Nyamai): Member for Luanda.

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Hon. Dick Oyugi (Luanda, DAP-K): Thank you very much, Hon. Temporary Speaker, for the opportunity to second this very important Bill. I stand to second the Traffic (Amendment) Bill, 2026, as presented by my dear friend and brother, Hon. Basil. As enumerated, the Traffic (Amendment) Bill, 2026, is a timely amendment to an Act that has, for a long time, seen many Kenyans suffer. Properties, including motor vehicles and motorcycles, have been detained unnecessarily for prolonged periods. This Bill seeks to amend the Traffic Act, Cap. 403. One of the things the Bill seeks to introduce is to ensure that a vehicle or motorcycle that is involved in an accident is not detained for more than 48 hours, for purposes of investigations.

If you move across this country, you will realise that police stations have become some sort of godowns. Many accident vehicles and motorcycles have been detained at police stations for long periods, some even for years. These vehicles have been exposed to weather elements, causing them to depreciate. Others have also been vandalised, resulting in the loss of various parts.

Long-term detention of vehicles has caused a lot of pain to their owners. Despite the fact that the police in most cases have already taken photographs and done the necessary reports, these vehicles continue to be held for long periods at the police stations. Therefore, this Bill seeks to protect motor vehicle owners, so that police stations do not become godowns with multiple accident vehicles and motorcycles.

Many boda boda get involved in accidents, which results in police officers confiscating the motorcycles and keeping them at police stations. If you go to a police station, you wonder whether it is a warehouse or a showroom for motor vehicles and motorcycles that have been involved in accidents.

This Bill seeks to establish a framework to ensure that vehicles and motorcycles that are involved in accidents are not held for long at the police stations. What is the advantage? Motor vehicles and motorcycles held in such facilities are vandalised leaving behind empty shells, which results in the owners incurring losses. Many young people purchase motorcycles on loan and by bad luck or by mistake, they cause an accident their motorcycles are detained at the police station while they continue to pay back the Mogo loans, which continue to accrue interest. We are trying to clear this up so that the police will only be allowed to hold a motorcycle or vehicle for a maximum of 14 days, so that our youth can continue to make use of their investment as the police continue with their investigations. The Bill does not purport to interfere with judicial processes. Sometimes vehicle owners are expected to pay some protection fees to ensure that their vehicles are protected. Therefore, this Bill goes a long way to clean up the sector and ensure that vehicle owners are protected.

I beg to second.

(Question proposed)

ADJOURNMENT

The Temporary Speaker (Hon (Dr) Rachael Nyamai): Hon. Members, remain upstanding. The time being 1:00 p.m., this House stands adjourned until this afternoon at 2.30 p.m.

(The House rose at 1:00 p.m.)

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